Americans appear to be a nation of incurable romantics, optimistically holding on to the notion of happily ever after, even in the face of empirical data to the contrary. Whether married, cohabiting, or single, whether gay or straight, Americans are continuously bombarded by romantic images of laughing, attractive couples (usually young, White, and heterosexual), moving effortlessly through life. And yet, however deeply the image of a life lived blissfully two-by-two is embedded in our collective psyche, the reality of the enduring, joyful, mutually enhancing intimate relationship often remains elusive, at least for some segments of the American population.

In this chapter, I discuss the current state of marriage in the United States and explore the sociocultural, psychological, and neurobiological variables that contribute to pitfalls in intimate relationships. After delineating the empirically based factors that are predictive of relationship stability and satisfaction, I present interventions for promoting healthier modes of relating on individual and societal levels.

MARRIAGE IN AMERICA: FOR BETTER AND FOR WORSE

Despite disturbing statistics with regard to the longevity of marriage in the United States, the vast majority of Americans continue to marry (and remarry). The divorce rate peaked in 1988 at 50%, and by 2001, 43% of first marriages ended in separation or divorce within 15 years (National Center for Health Statistics, 1989, 2001). However, more recently, a number of significant changes have taken place in American society with regard to marriage. For example, in 2014, the age of first marriage rose to 25.8
for women and to 28.3 for males, as compared to age 20 for women and age 23 for men in the 1950s (Miller, 2014). Reasons for the postponement of marriage include a desire by both males and females for greater educational attainment and an increase in societal acceptance of cohabitation before marriage (Copen, Daniels, Vespa, & Mosher, 2012). In 1982, 44% of women were married for the first time, a percentage that declined to 36% in 2010. Also, for women aged 15 to 44, the percentage of never married rose from 34% in 1982 to 38% by 2010.

However, marriage statistics differ significantly by race. For example, in 2010 the percentage of never married Black women was 55%, as compared to U.S.-born Hispanic women at 49%, Asian women at 39%, and White women at 34% (Copen et al., 2012). Also, rates of marriage positively correlated with educational attainment. For example, 37% of women without a high school diploma or a GED were married in 2012, compared to 58% who had a bachelor’s degree and 63% who had a master’s degree or higher. In contrast, women who cohabitate tend to be less educated (Copen et al., 2012).

Despite the significant changes noted above, Copen et al. (2012) have indicated that, based on statistics gathered from 2006 to 2010, the probability of a first marriage reaching its 20th anniversary is consistent with statistics gathered three decades ago, that is 52% for women and 56% for men.

These are aggregate statistics for all marriages; however, and they ignore the variables of age at first marriage, level of education, level of income, and race. As with other benefits and privileges, there appear to be two Americas with regard to marriage. Persons who are White, wealthy, and highly educated enjoy the benefits of being married, while non-White, less wealthy, and less educated segments of the population are less likely to be married and more likely to divorce. For example, the latest statistics available indicate that college educated persons who married in the current millennium have an 11% divorce rate at 7 years of marriage (Miller, 2014). Similarly, Heller (2012) noted “a substantial divergence in marital outcome, with the divorce rate for college educated women dropping to about 20%, half the rate for non-college educated women” (p. 1). Heller also noted that a college education leads women to marry later and to have an independent source of income.

Conversely, the rates of marriage and divorce for less privileged women have not changed for the better over the last 3 decades. Rather, the single parent household, usually headed by females, perpetuates the feminization of poverty and its purported negative effects on children, such as higher rates of school dropouts, substance abuse, teen pregnancy, conduct disorders, depression, suicide, and crime (Berger & Hannah, 1999; Wallerstein & Blakeslee, 1989; Wilson, 2002).

It should not be surprising then that marriage has been shown, overall, to have positive and protective effects, physically, emotionally and financially, for both adults and children (Kiecolt-Glaser & Newton, 2001; Steil, 2001; Wilson, 2002). It has been reported that, in general, married people are happier, live longer, are wealthier, and enjoy greater social support than unmarried people (Kiecolt-Glaser & Newton, 2001; Ross, Mirowsky & Goldsteen, 1990; U.S. Bureau of the Census, 2000). However, there is a robust body of literature that indicates that men benefit far more than do women on most outcome measures related to marriage. Therefore, the “protective effects of marriage” appear to be significantly greater for men than they are for women (Barnett & Shen, 1997; Beach, Smith, & Fincham, 1994; Kiecolt-Glaser & Newton, 2001).

Among the gender-based asymmetrical risks and benefits of marriage are the
following: higher rates of depression for married women (Christian, O’Leary, & Vivian, 1994); significantly more housework and child care responsibilities for married women, even among employed women (Barnett & Shen, 1997; Hochschild, 1989); greater role conflict and role strain for married women (Cowan et al., 1985); and significantly more relationship work done on behalf of married men by married women than vice versa. Relationship work includes such behaviors as conversation initiation, providing affirmation and emotional support, maintaining the husband’s connection with his extended family and facilitating his social life, as well as monitoring his physical health and well-being (Erickson, 1993; Maushart, 2002; Umberson, 1992). In sum, women are less satisfied being married than are men (Steverson & Wolfers, 2009) with the lowest level of satisfaction reported by Black wives (Corra, Carter, Carter, & Knox, 2009).

Of particular significance is the work of Kiecolt-Glaser and Newton (2001), who analyzed 64 empirical articles published from 1990 to 1999 that investigated the potential consequences of marital functioning for health outcomes. With regard to the relationship between marital functioning, physical health, and gender, these researchers concluded that, overall, being married, as compared to being unmarried, notably benefits the health and mortality rates of men more than it does that of women, and that marital conflict has a significantly greater negative effect on the health of women than it does on that of men. A perhaps related and certainly alarming finding is that being a victim of violence, including murder, decreases for males and actually increases for females when they marry (Christopher & Lloyd, 2000). Currently, domestic violence is the leading cause of injury for women, and 30% of murders of females are committed by their partners (Christopher & Lloyd, 2000; Wood, 1996). (For a complete discussion of domestic violence, see Chapter 12, this volume).

For all of its pitfalls, marriage confers legitimacy, societal acknowledgement, familial support, structure, and rituals upon intimate relationships. As a legal construct, marriage protects such rights and privileges as inheritance, insurance, hospital visitations by one’s partner when critically ill, and consultation regarding medical and end-of-life decisions about a loved one (Clunis & Green, 2000; Rohrbaugh, 1992). Therefore, the most significant and positive change with regard to marriage in this millennium has been the legalization of same-sex marriage. The recent Supreme Court decision is reflective of the sea change in the attitudes of Americans with regard to equal rights for the gay and lesbian community.

THE INFLUENCE OF SOCIOCULTURAL AND PSYCHOLOGICAL FACTORS

All human interaction takes place within a matrix of social, cultural, political, psychological, and neurobiological influences. In this section, I explore the ways in which each of these factors affect the personality development of females and males, create gendered cultures of communication, and place relationships at risk across dimensions of gender, race, ethnicity, and sexual orientation. I also discuss the ways in which family dynamics and attachment trauma in early life facilitate enduring internal models and relational images that profoundly affect patterns of interaction in intimate relationships in adult life.

Female and Male Personality Development

Freud (1925) asserted that the disparities he had observed between female and male personalities were the inevitable consequences
of biological/anatomical differences. Ignoring the sociocultural context of Victorian Austria and his own phallocentric bias, Freud pathologized the feminine personality as being characterized by passivity, narcissism, shame, envy, and a decreased capacity (compared to men) to render moral decisions. Freud viewed these characteristics as being universal and immutable in women. More recently, Erikson (1968) and Levinson (1978) posited that the goal of adolescent and child development is the creation of an autonomous self-identity through the process of separation and individuation.

The last 25 years has seen the emergence of the “relational perspective,” which has offered a rich and conceptually sophisticated model of female development that is forged within the matrix of the feminine worldview and that acknowledges the salience of sociocultural factors (Jordan, Kaplan, Miller, Stiver, & Surrey, 1991; Miller & Stiver, 1997). Implicit in this perspective is an alternative pathway to that of separation and individuation for the development of the self, one in which identity development takes place precisely within the context of relationships (for more about the relational perspective, see Chapter 9, this volume).

The relational strengths attributed to women within this framework are justifiably noted and lauded; this is certainly a far cry from the pathologizing of women’s desire for connection as “dependency,” “codependency,” or “enmeshment.” In fact, it has been hypothesized that it is precisely women’s greater propensity for building connections with family members and (especially female) friends and their ability to access emotional support in times of crisis that account for the more favorable outcomes for women than for men following divorce or death of a partner (Stroebe, Stroebe, & Schut, 2000).

However, the relational perspective is also explanatory of findings that indicate that the levels of women’s self-esteem and well-being decrease and their levels of depression, anxiety, and negative physiological indicators increase when intimate relationships are unsatisfying or conflictual (Acitelli & Antonucci, 1994; Culp & Beach, 1998; Kiecolt-Glaser & Newton, 2001). For example, Cano and O’Leary (2000) reported that women who had experienced “humiliating marital events,” such as infidelity or separation initiated by their husbands, were six times more likely to be diagnosed with a major depressive episode than control participants reporting similar levels of overall marital discord, lifetime histories of depression, and family histories of depression. This finding suggests that a discrete devaluing marital event can have a significant effect on women’s level of psychological functioning.

The impact of a humiliating event such as infidelity has become even more concerning in the age of the Internet affair, an example of infidelity that can take place in the presence of one’s partner without her knowledge. Preliminary findings indicate that the “Internet affair” can have the same devastating effects as one that takes place in “real life” (Smith, 2011).

In my own clinical work with emerging female adult college students, I have observed that this population does express concern about how their partners are using technology and its impact on their relationship. For example, they express anxiety about their partners cheating on them virtually, engaging in cybersex, and spending unknown quantities of their time watching pornography on the Internet. Some clients express discomfort with “having to” engage in sexual acts with which they feel uncomfortable and that they believe have been “inspired” by watching pornography. In addition, a recent study of 171 female college students with partners who engage in the use of pornography concluded that “previous male partners’ pornography
use was associated with women's lower body appreciation and self-esteem and higher negative affect and relationship anxiety" (Tylka & Van Diest, 2015, p. 81).

Clients also have reported feeling pressured to engage in “sexting” and in cybersex, despite being aware that they have no control over these images once they are in cyberspace. Why, then, would these educated, aware young women engage in activities that they find humiliating and potentially damaging? A particularly cogent explanation has been offered by Judith Jordan (2003) within the context of the relational model. Jordan (2003) stated that “[w]hen a more powerful person empathetically fails a less powerful person . . . she will begin to engage inauthentically or partially. She will begin to twist herself to ‘fit in’ with whatever the more powerful person needs or wants her to be” (p. 23).

Taken together, the historically disparate processes of personality development for females and males, within relational and autonomy contexts, respectively, may be explanatory of the recursive conflicts that take place in heterosexual intimate relationships because of gendered styles of communication. For example, females often use conversation to share feelings, receive support, and build connection (“rapport-talk”), while males often use conversation to problem solve, to assert dominance, to get attention, and to impart information (“report-talk”; Tannen, 1990). Thus, when women raise issues of concern they are looking for support and empathy, and often men offer advice and solutions. As a consequence, women feel unheard and misunderstood, and men feel frustrated, powerless, and angry when their attempts at helping are rejected. Understanding that both rapport talk and report talk result from a complex socialization process may help men and women decrease relationship conflict.

**Sex-Role Socialization and the Impact of Popular Culture**

Implicit in the foregoing discussion on male and female personality development and gendered communication styles is the pervasiveness of power disparities and the perpetuation of the sex-role socialization process in our culture, including the popular culture. For example, related to Tannen's research, John Gray (1992) wrote the bestseller *Men Are From Mars and Women Are From Venus*. However, Gray's writings suggest that women learn to accept gender differences rather than try to change the male in any way. It should be noted that *USA Today* has identified this book as one of the most influential in the last 25 years (Loscocco & Walzer, 2013). Similarly, the comedian and talk show host Steve Harvey (2009), author of *Act Like a Lady, Think Like a Man*, encourages women to not only refute the idea that they can change their men but also to make them feel like kings and appreciate them under any circumstances. Harvey stated, “[A]nd the best way to appreciate him is by being a girl and especially letting him be the man” (p. 190). Lest the reader relegate this advice to the wisdom imparted by 1950’s and 1960s TV sitcoms, the reader should be aware that this book was listed by *The Chronicle of Higher Education* as one of the 10 most read books on college campuses (Loscocco & Walzer, 2013).

It is not only self-help books targeting female readers that have become significant agents of sex-role socialization in the popular culture. Given the messages that females have been exposed to about man-pleasing and not challenging male dominance, it should come as no surprise that the novel *Fifty Shades of Grey* (James, 2011) and its sequels have sold over 100 million copies worldwide and have been translated into 51 languages (Lewis, 2014).
These books go beyond the typical gender-stereotypical behaviors of romance novels, into the world of bondage/discipline, dominance/submission, and sadism/masochism (BDSM). In short, the plot line involves a very wealthy man, Christian Grey, who meets a recent college graduate, Anastasia, and grooms her to be a “submissive” in a nonromantic BDSM arrangement. He writes a multipage contract stipulating the details of what he will expect of her, such as never making eye contact or touching him, and always being sexually available. Grey then introduces Anastasia to instruments that will be used to inflict pain on her body.

In 2013, a qualitative study was conducted in which three social scientists were asked to focus on the first eight chapters of *Fifty Shades of Grey*, in order to elucidate themes and to determine whether they contained evidence of intimate partner violence (IPV), as defined by the Centers for Disease Control (CDC; Bonomi, Altenburger, & Walton, 2013). The participants unanimously agreed that Christian Grey’s behaviors (e.g., stalking, intimidation, coercion, manipulation, threatening, humiliation, jealousy, isolation, control, and the infliction of pain) met the CDC criteria for IPV, and that Anastasia exhibited classic signs of an abused woman, such as disempowerment, loss of identity, chronic fear, desperate yearning for a real connection, and attempts to manage the abuser’s behavior (Bonomi et al., 2013).

Clearly, these are works of fiction and fantasy. Yet, the question remains as to why *this* particular fantasy of ultimate male dominance and absolute submission of a young woman caught the attention and fueled the fantasies of so many women. Is this the to-be-expected result of the confusing messages that females receive about the nature of male/female relationships? Does this suggest that females are ambivalent about their own power? In any event, these books reflect and perpetuate a popular culture in which male dominance and female objectification and victimization have become normative.

The objectification of females and the distorted images of intimate relationships are not new phenomena. For example, the extremely negative impact of the messages conveyed by advertisements on women's body image and self-esteem has been well documented (Kilbourne, 1999, 2002). Similarly, the sexual dehumanization and disrespect of women portrayed in some rock and rap lyrics and videos have been noted with great concern for decades (Media Education Foundation, 1990, 1995). The high rates of eating disorders among women and the ongoing psychological, sexual, and physical violence against women suggest that these media messages are being absorbed and internalized by both males and females.

Yet, it is interesting to note that more recently there has been a striking and rapidly growing presence of female rappers, hip-hop artists, and pop music singers. This phenomenon may be regarded as a testament to growing female power but also as paradoxical. Many (though not all) of these powerful artists are perpetuating the objectification of females, but, in this case, it is in the form of *self*-objectification, in that these artists continuously push the boundaries with regard to exploiting their own sexuality. It appears, then, that these talented and creative women have absorbed the message that their bodies are commodities that must be marketed as explicitly as possible in order to be successful. It should be noted that this is not a requirement for male performers.

In addition, there has been a growing presence of powerful women, including women of color, on TV, online streaming services, and in movies. However, many of these women also are depicted as being involved in chaotic relationships and in other self-destructive behaviors. Further, themes of adultery, deceit,
manipulation, and violence abound in all entertainment media. It can therefore be suggested that the predominant relational images that are conveyed in the popular culture indicate that chaotic and exploitive modes of interaction and communication are normative, leaving young people with a paucity of exposure to healthy, mutually satisfying, authentic relationships (Grieger & Georgiades, 2003).

**Hookup Culture**

Perhaps related to the themes of confusion about what constitutes a healthy relationship and the relational images that abound in the popular culture is the emergence of hookup culture (Garcia, Reiber, Massey, & Merriewether, 2012). Garcia and colleagues (2012) found that dating has decreased, and sexual activity outside of committed relationships has increased and become normative among emerging adults, both straight and gay. One type of hookup that is known to emerging adults is “friends with benefits.” Garcia et al. cite a study in which 60% of undergraduate participants had a “friends with benefits” relationship. Armstrong, Hamilton, and England (2010) cite research that indicates that among 14,000 college student participants, 72% reported having engaged in a hookup by their senior year, and 20% of respondents reported having had ten or more hookups during their 4 years in college.

Garcia et al. (2012) noted that the popular culture portrays men as more active sexual agents and women as passive objects, and that contemporary music lyrics extol uncommitted sexuality, but at the same time, they have observed that young women often get mixed messages about being sexually available, on the one hand, and being a good girl, on the other. Clearly, the double standard appears to have been fully absorbed by emerging adults, with both men and women engaging in “slut shaming.” This practice has been made even easier to engage in, facilitated by social networking and online gossip sites, as well as phone apps that protect the identity of the perpetrator.

Despite the preponderance of casual, uncommitted sexual activity among emerging adults, research indicates that both college-age men and college-age women prefer a traditional romantic relationship, with women preferring a traditional relationship at a higher level than males (Garcia et al., 2012). One reason for this disparity may be that women report that their sexual satisfaction is much higher in a committed relationship and that having sex in the context of a relationship protects them from being judged by their peers (Armstrong et al., 2010).

However, some college women report a reluctance to get involved in a committed relationship, because it can detract from their academic and career aspirations, as well as from experiencing an unrestricted social life without a partner controlling their behavior. In addition, some college women have been stalked and threatened when they wanted to end a relationship and have been physically and emotionally abused while in a relationship. Armstrong et al. (2010) sum up this point of view by stating, “The cost of bad hookups tend to be less than the costs of a bad relationship: bad hookups are isolated events, but bad relationships wreak havoc with whole lives” (p. 26).

In my own work with emerging adults, I have seen clients with hookup regret due to the frequent concurrent involvement of alcohol and other drugs, which can blur the boundaries between consensual sex and rape. Unprotected sex and all of its related risks, the desire to be in a romantic relationship, and the aforementioned shaming by peers are also factors in precipitating hookup regret. I have also seen clients who participate in hookups with the same person (male or...
female) over extended periods of time. Among this population, clients report the hope that these regular hookups will lead to a defined, committed relationship, despite evidence to the contrary. These dynamics of inequity and powerlessness for the more committed partner often lead to the development of anxiety, lowered self-worth, shame, and depression. (For a full discussion of counseling emerging adult women, see chapter 16, this volume.)

**Other Sociocultural Factors**

Although much progress has been made over the last 40 years in challenging inequities and gender-based stereotypes, they continue to impact virtually every aspect of American life. Disparities in power as well as ongoing assumptions about White, male, heterosexist supremacy continue to have extremely toxic effects on relationships (Hines & Boyd-Franklin, 1996; Pharr, 1988; Sue & Sue, 1999). With regard to racial and ethnic minority couples and families, the deleterious effects of ongoing oppression, “microaggressions,” injustices, and economic disadvantages that accrue from racism have been well documented (Boyd-Franklin & Franklin, 1998; Sue, 2010).

For example, Boyd-Franklin and Franklin (1998) have elucidated some of the burdens placed on Black couples that White couples are generally not forced to experience. These burdens include Black males being an “endangered group,” disproportionately vulnerable to incarceration and early mortality, and the mixed messages to Black males regarding their need to be assertive and financially productive, while simultaneously not being threatening to Whites. Taken together, these and other concomitants of racism, have created inordinate challenges for Black males in their roles as providers and have generated ongoing fear within Black couples and Black families regarding the safety and survival of their husbands, male partners, and sons (Boyd-Franklin & Frankie, 1998; Boyd-Franklin & Karger, 2012). Sadly, recent high profile incidents of Black males being killed by police officers and by civilians without negative repercussions have done nothing to alleviate concern about the safety of Black males in our society.

Despite the legalization of same-sex marriage, lesbian couples may nevertheless experience oppression and disapproval from families of origin who may fail to embrace their daughter’s wife and may exclude her from family events. Anticipated disapproval by family of origin members and discrimination by a homophobic community may continue to shroud the lesbian couple and family in secrecy (Bradford, Ryan, & Rothblum, 1994; Rohrbough, 1992), particularly in states where most residents strongly disapprove of same-sex marriage.

Interfaith, interracial, and cross-cultural couples are also particularly vulnerable to relational stress, due to their increased need to negotiate differences across many dimensions, as well as possible censure and rejection from family of origin members and the larger cultural milieu (Crohn, 1998). Women across many relationship configurations potentially face negative impacts accruing from the intersections of gender, religion, race, and/or sexual orientation (Clunis & Green, 2000; Tatum, 1997).

**Psychological and Neurobiological Factors**

The negative impacts of individual psychopathology, stunted neurological development, or a history of family dysfunction on the individual’s ability to function in intimate relationships constitute enduring vulnerabilities that cannot be overstated (Karney & Bradbury,
1995; Miller & Stiver, 1997; Schore, 2002). Within the relational perspective, psychological problems are caused by early experiences with “disconnections,” such as marital dysfunction between parents, a lack of attunement between parent and infant, secrecy, neglect, or psychological, physical, and/or sexual abuse that leave the individual with distorted and chaotic internalized “relational images” (Miller & Stiver, 1997).

Attachment theory (Bowlby, 1969) has been posited as being particularly useful for explaining the various styles with which partners interact in romantic relationships (Hazan & Shaver, 1987). Within this theoretical framework, experiences with caregivers in early life lead to the creation of “working models” of both the self and significant others that remain stable over time and significantly influence both personality development and relational behaviors, thoughts, and feelings (Pietromonaco & Barrett, 2000).

Further, Schore (2002) has found that relational trauma in early infancy, caused by abuse or neglect by the primary caretaker, has a negative effect on right brain development, which is critical for the reception and expression of emotion and for emotional regulation. Schore (2002) also stated that “[t]he early forming brain stores an internal working model of the attachment relationships” (p. 15). Based on their observations of infant/mother interactions, attachment researchers Ainsworth, Blehar, Waters, and Wall (1978) delineated three attachment patterns in the infant/caregiver dyad: secure, avoidant, and anxious/ambivalent. These specific attachment typologies have been shown to be stable and continuous over time and to affect relationship functioning and stability in adult life (Carnelly, Pietromonaco, & Jaffe, 1994; Kirkpatrick & Davis, 1994; Klohnen & Bera, 1998). For example, in a longitudinal study of women from the ages of 21 to 52, Klohnen and Bera (1998) found that over the course of 31 years, the stability of internal working models and the predicted effects of the attachment styles on subsequent intimate relationships were confirmed.

More recently, the category of Type D (insecure/disorganized/disoriented) attachment has garnered much attention (Schore, 2002). The Type D attachment style was delineated by Main and Solomon (1986) who observed that some infants displayed signs of alarm rather than safety in the presence of the primary caretaker as well as apprehension, confusion, and dissociation. Schore (2002) noted that males who endured abuse as infants are more likely to exhibit dysregulation by hyperarousal and females by dissociation. It appears reasonable to conclude that individuals with Type D attachment style will have difficulty with creating stable and healthy relationships.

In sum, these psychological and neurobiological experiences leave the individual with unmet needs for security and affirmation, with emotional dysregulation, a greater vulnerability to mental disorders, and a propensity to dysfunctionality in intimate relationships (Grieger, 1995; Miller & Stiver, 1997; Schore, 2002).

FACTORS RELATED TO RELATIONSHIP STABILITY AND SATISFACTION

Although the heterosexual marital relationship is the one most frequently studied, there is also an emerging body of literature on gay and lesbian couples (Kurdek, 1998, 2007, 2008) and cohabiting couples (Stack & Eshleman, 1998) with regard to predictors of relationship stability and satisfaction. Factors linked to relationship stability and satisfaction, as well as factors that put relationships at risk are discussed below.
Communication, Problem Solving, and Conflict Resolution

Good communication and conflict resolution skills have been shown repeatedly to be positive indicators of long-term relationship satisfaction (Markman, Floyd, Stanley, & Storaasli, 1988; Rogge & Bradbury, 1999a). In addition, Kurdek (1991) found that problem-solving skills in managing conflict are also linked to relationship satisfaction among gay and lesbian partners.

Gottman (1999) found that couples in stable and happy marriages used positive affect with remarkable precision to de-escalate conflict and to move the overall affect in the direction of decreased negativity. It should be noted that conflict and negative affect, in and of themselves, were not found to be predictors of relationship dysphoria. More important is the ratio of positive to negative affect and the nature of how conflict is resolved, that is, with the relative absence of such corrosive behaviors as criticism, contempt, defensiveness, and stonewalling. Driver, Tabares, Shapiro, and Gottman (2012) also noted that happily married couples engage in conflict but without expressing contempt. They have identified three effective types of conflict resolvers. They are the “validators” who rarely raise their voices and talk things out, the “volatiles” who do raise their voices and argue passionately but treat each other as equals throughout, and the “avoiders” who express love and satisfaction in their marriages while minimizing problems and agreeing to disagree in order to avoid conflict.

Social Support

Social support has been conceptualized as assistance related, which includes providing information, guidance, advice, and tangible help and nonassistance related, which includes offering reassurance, empathy, unconditional positive regard, and opportunities to debrief (Cutrona & Russell, 1990). It has been widely assumed that spouses’ perceptions of social support would be linked to marital satisfaction, and, indeed research data support this hypothesis (Cutrona, Suhr, & MacFarlane, 1990). Acitelli and Antonucci (1994) have found that among older couples (mean age = 74), perceptions of social support are more closely linked to marital satisfaction of wives than husbands, and Kurdek (1991) has found that among gay and lesbian couples, perceived emotional support was positively related to relationship satisfaction. Bradbury, Fincham, and Beach (2000) have hypothesized that as dual-career couples increase, the support that partners give each other for concerns that arise outside of the relationship will become increasingly important.

Equality and Power

Steil (2001) has pointed to a growing body of literature that confirms that, in general, equality is positively related to relationship satisfaction. Further, in reviewing multiple studies on this topic, Steil (1997) concluded that, more specifically, shared power in decision making is positively related to mutually supportive communication, more affection and intimacy, and greater sexual satisfaction. In addition, Leonardo (2000) found that couples who shared equal responsibility for housework and childcare indicated lower levels of marital dysphoria and reported that they derived more benefits from the marital relationship. Steil and Whitcomb (1992) found that men and women in equal relationships reported feeling less stressed by marital responsibilities than those in traditional marriages. Gottman (1999) concluded that “sharing power, in terms of what I call ‘acceptance of influence’ (particularly the husband’s
acceptance of his wife’s influence), is critically important in the stability of marriages, even among newlyweds and is also critically important in understanding spouse abuse” (p. 15).

Women in same-sex relationships are likely to endorse, and in fact to have, equitable distributions of power, even in the face of large earning disparities (Blumstein & Schwartz, 1983; Kurdek, 1993). The sharing of power and privileges, equity in decision making, and shared household responsibility appear to be critical correlates of satisfaction in lesbian relationships (Huston & Schwartz, 1996). Based upon evidence from a longitudinal study of married heterosexual and lesbian and gay cohabiting couples, Kurdek (1998) concluded that equality may be a core dimension in conceptualizing relationship quality. It should be noted, however, that the value for shared power and equality between intimate partners may differ dramatically across cultures (Grieger, 2008; McGoldrick, Giordano, & Pearce, 1996).

Some Risk Factors

Not surprisingly, physical violence in intimate relationships has emerged as a primary predictor of divorce and relationship dissolution (Amato & Rogers, 1997; Jacobson, Gottman, Gottner, Berns, & Shorrt, 1997; Johnson & Ferraro, 2000; Rogge & Bradbury, 1999a, 1999b; Sanchez & Gager, 2000). Further, both physical and psychological violence can create posttraumatic stress disorder, depression, and anxiety for victims across sexual orientations (Renzetti, 1992). These variables can also generate lasting posttraumatic effects in children who witness abuse, and they can also increase the likelihood that members of the next generation become either perpetrators or victims of interpersonal violence (Walker, 1994, 2000). Substance abuse by a partner in an intimate relationship has been linked to lower levels of problem solving and more blame in relationships (Fals-Stewart & Bircher, 1998), and to more physical violence, marital dissatisfaction, and divorce (Leonard & Blane, 1992; Kaestner, 1997). In fact, Walker (2000) found that 60% of battered women reported that their partners frequently drank to excess, and Browne (1987) found that in situations in which homicide resulted from battering incidents, excessive use of alcohol was reported in 80% of these cases.

A related variable is the inability to de-escalate the level of negative affect, particularly hostility and contempt, once a conflictual interaction begins (Gottman, 1999). Gicy and Kelly (1992) found that intense fighting was noted by 40% of couples who had divorced in their sample. They also reported that 80% of couples noted feeling unloved and diminished closeness as the major reasons for divorcing.

Implications for Practice

Individual Counseling and Psychotherapy With Women

Miller and Stiver (1997) have proposed a relational reframing of psychotherapy that places the primary emphasis on the quality and nature of the therapeutic relationship for creating a “new relational experience” (p. 121). Within this framework, it is posited that rather than perpetuating the traditional therapist stance of the neutral and professionally distant observer, it is precisely the quality of the mutually empowering therapeutic connection that leads the client to create more authentic and mutually empowering connections with persons in her own life.

Based upon my own clinical experience, I affirm the centrality of the therapeutic relationship as delineated within the relational
framework, and I reaffirm the enduring wisdom and precision of the core conditions first posited by Carl Rogers (1951), those of accurate empathy, warmth, and genuineness, as forming the basis for working with all clients, regardless of the counselor or therapist’s orientation. For clients seeking assistance with their own relationships, the therapeutic relationship can serve as a model for respectful and empathic relating, as a corrective emotional experience, and as a “holding space” in which painful experiences and feelings can be safely accessed, expressed, and validated, and in which the authentic self of the client may emerge.

Therefore, I believe that it is important to allow women seeking help for relationship issues to fully and completely tell their story. To prematurely cut off or curtail the client’s need to talk about her own experience may be a recapitulation of the silencing she has already experienced in the “disconnections” within her family of origin and in the nonmutuality of her current intimate relationship. Instead, relational therapy provides the experience of telling her story in the presence of an attuned and empathetic listener.

The process of working intensively with women about their relationship issues will inevitably create countertransference in the female therapist. For example, the therapist’s own relational images will become a part of the therapeutic process, and painful relationship experiences may be reactivated (Miller & Stiver, 1997). Further, the therapist may experience feelings of impatience or annoyance at the client for “being stuck” in an unhealthy relationship. These countertransference thoughts and feelings should be used as important sources of information that facilitate empathy and connection with, rather than distance from, the client. Further, it should be understood that because of the myriad psychological and sociocultural factors already noted, disconnecting from an intimate partner is an extremely difficult, complex, and painful process for women.

As with all counseling and therapeutic processes, issues related to diversity must be fully acknowledged and integrated into the therapeutic process. Differences around such issues as race, ethnicity, sexual orientation, age, religious and spiritual beliefs, and gender role expectations should be acknowledged and explored to the client’s satisfaction. Counselors should also be aware of and respect possible negative consequences that may occur if decisions are made that run counter to the client’s cultural context. (For a full discussion of cultural factors, see Grieger, 2008.)

Counselors and therapists should also take care to evaluate whether there is a potential danger to the client, her children, or other members of the household, regardless of whether the client directly raises this issue. The importance of informed consent must be noted in this regard. Limits of confidentiality, duty to protect and to warn, and legal mandatory reporting requirements should not come as a surprise to clients once they are in the midst of an ongoing therapeutic process (Corey, Corey, & Callanan, 2015). For clients who are already experiencing the impact of power inequities, the failure to fully inform them prior to their entering counseling is particularly damaging.

Among the therapeutic goals for women dealing with intimate relationship issues, the following are suggested: identification of unhealthy, chaotic, or unsatisfying ways of relating in the client’s current relationship; awareness of the dynamics in early significant relationships and their contribution to the client’s “relational images” or “working models” as they impinge upon her current relationship; discovering the client’s own authentic needs and desires in intimate relationships; identification of the client’s
conflicts that arise from familial or cultural messages or from her own psychological dynamics (e.g., insecure attachment) that make it difficult to leave the relationship, if she would like to do so; and identification of the client’s own strengths, capacities and competencies, which may have been denied in her family of origin and in her current relationship. Ultimately, the goal of counseling women with relationship concerns is to enhance their ability to identify their own needs and desires in intimate relationships and to choose, and effectively function within, relationships that are authentic, mutually empowering, and joyful (Doherty & Cook, 1993; Grieger & Georgiades, 2003; Jordan, 1991).

Social Activism

Social change agency and social activism have been posited as appropriate and necessary roles for counselors (Grieger & Ponterotto, 1998; Lee, 1998). Because barriers to healthy intimate relationships are embedded within the larger societal context, counselors are urged to intervene at that level. For example, counselors can act to change the sociopolitical context by continuing to support the legalization of same-sex marriage, advocating for family-friendly policies in the workplace, and working with law enforcement personnel to take threats to the safety of women seriously. They can also speak out against elements within the popular culture that demean women and persons of color and that normalize violence or chaotic behavior in relationships.

Counselors in all educational systems, from kindergarten through graduate school, have multiple opportunities to bring relationship issues into the formal and informal curriculum. Students can be challenged to think critically about messages in the popular culture and what they communicate about being female, being male, and about what is appropriate in intimate relationships. At the college level, students can be empowered to insist that their administration take the issues of rape and partner violence seriously and consequeate these behaviors, as required by Title IX. Further, they can be trained in bystander intervention, which gives them the skills to interrupt situations in which their peers are vulnerable to interpersonal violence. (For information about Bystander Intervention Training, see for example, Step Up, University of Arizona). In general, counselors in all educational settings should collaborate with faculty, administrators, and staff to create hospitable and safe environments for all students. (For a complete discussion of collaborative interventions on the college campus, see Grieger & Toliver, 2001.)

On a community level, families should have access to primary prevention delivery systems around issues such as parenting skills, communication, stress reduction, conflict resolution, anger management, and relationship enhancement. Clearly, the seeds of relationship problems are sown within our families of origin. To the extent that families can foster secure and healthy attachments and can nurture each of their members with love, respect, and kindness, they can become models for functionality, and they can facilitate the development of healthy relational images for the next generation.

REFERENCES


Miller, C.C. (2014). *The divorce surge is over, but the myth lives on.* Retrieved from http://www.nyti.ms/11NKDg6


