

ABSTRACT

Title of Thesis: PERSONAL RELATIONSHIP COMMITMENT, POSITIVE
AND ANXIOUS EMOTIONAL AROUSAL, AND
COMMUNICATION IN CLINIC COUPLES

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This study examined relationships among partners' relationship commitment, positive and anxious forms of emotional arousal prior to engaging in a discussion of a conflictual relationship issue, and subsequent communication behavior, in a sample of clinical couples who had experienced psychologically and mild to moderate physically abusive interactions. A secondary analysis was conducted with data from 68 couples who had sought therapy for relationship problems. Results indicated that men and women with higher commitment experienced less anxious arousal and more positive emotional arousal prior to engaging in problem-solving. Greater commitment in men was associated with more constructive communication behaviors, and women with higher levels of anxiety engaged in more negative communication. Men's positive emotional arousal was associated with more positive communication behavior and less negative communication behavior. Men's positive emotional arousal mediated between commitment and constructive communication behaviors; however, anxious emotional arousal did not. Implications for couple therapy are discussed.

PERSONAL RELATIONSHIP COMMITMENT, POSITIVE AND ANXIOUS
EMOTIONAL AROUSAL, AND COMMUNICATION IN CLINIC COUPLES

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Chapter 1: Introduction

Statement of the Problem

Constructive and effective communication is an essential process for the success of intimate couple relationships. Doss, Simpson and Christensen (2004) found that the primary reason couples seek therapy is due to concerns regarding the quality of their communication. Sheras and Koch-Sheras (2006) note that although arguments are to be expected as partners co-create their relationship, constructive conflict-resolution communication promotes the couple's growth and fulfillment, whereas destructive communication involving verbal attacks and blaming perpetuates or escalates conflict and results in relationship distress. Similarly, Gottman's (1994) observational research on sequential patterns in couple communication has identified destructive "cascades" in which partners' exchanges of messages involving criticism, defensiveness, contempt, and stonewalling (withdrawal) are highly predictive of relationship distress and dissolution.

Given that couples who seek therapy for relationship problems frequently present with difficulties in communicating, couple therapists from a variety of theoretical orientations commonly use some interventions that focus on improving communication, so that partners will be better able to resolve conflicts in their relationships. However, simply teaching couples communication skills and encouraging them to practice them may overlook barriers to communication existing in distressed couples' relationships. For example, it takes a certain level of commitment to the relationship to work at increasing levels of constructive communication patterns. Members of couples who choose to come for therapy are to some degree committed to their relationship. This commitment is important to the process of therapy, but more importantly to the well-being of the

relationship. According to Sheras and Koch-Sheras (2006), without commitment, couple therapy will be unsuccessful. Commitment contributes to partners' trust in their relationship and enables the couple to work as a unit to build a healthier and well functioning relationship (Sheras & Koch, 2006). Wieselquist, Rusbult, Foster, and Agnew (1999) also found that individuals' levels of commitment are associated with their levels of pro-relationship behaviors such as "accommodative behavior and willingness to sacrifice." An individual's ability to give attention to the partner, ability to behave in an encouraging and caring fashion, and willingness to work as a unit through relationship issues may be helpful when a couple discusses conflictual topics or engages in problem solving. The effort required to make changes in one's relationship during therapy can be substantial, so without sufficient commitment to that effort on both partners' parts, the success of therapy can be limited. Considering how important commitment is to the success of couple relationships, it is notable that little research has been conducted on partners' commitment levels and their communication regarding issues in their relationships. Consequently, the present study was designed to investigate the relation between partners' commitment levels and their communication while discussing topics of conflict in their relationship.

Partners' communication quality also is likely to be influenced by the conditions that exist at the time when they are discussing important topics regarding their relationship. In particular, when members of a couple are discussing particularly difficult issues, their emotional responses at the time may affect their ability to put constructive communication skills into action. Greenberg and Goldman (2008) argue that partners' emotional responses to each other have powerful effects on them individually

(psychological well-being, physiological arousal) and in the ways that they communicate verbally and nonverbally with each other. In couple interactions, when these emotions are not handled appropriately, partners may react by withdrawing or attacking the other (Greenberg & Goldman, 2008). Greenberg and Goldman (2008) provided an example of men's behavior from an emotional theory perspective: men attempt to regulate their affect, because they are afraid that expression of emotions is a sign of weakness. They then turn to controlling behaviors in hopes of regulating their fear, shame, and/or anger, which can be very destructive in the context of couple communication patterns (Greenberg & Goldman, 2008). Consequently, clinicians such as Greenberg and Goldman work to increase partners' awareness of their emotional responses to each other and develop more constructive means of communicating with each other about their emotions and needs. Another example in which therapeutic interventions are used to change destructive effects of emotions on couple communication is the use of anger management in treatment of couples' psychologically and physically aggressive behavior (Heyman & Neidig, 1997; LaTaillade, Epstein, & Werlinich, 2006).

In spite of widespread acknowledgment that individuals' emotions influence their behavior toward their partners, little research has examined how the emotions that partners experience before they interact with each other influence their communication. New research studies should incorporate the role of emotions when analyzing couple communication patterns. Clinicians often see couples struggle to engage in constructive communication during therapy sessions, as they appear to be so driven by emotion during a conversation that many of the communication skills they have been taught seem to disappear. In contrast, many other couples exhibit positive emotions when approaching

discussions of relationship issues and are better able to engage in constructive communication patterns. However, there is a need for more information about factors that are associated with this variation in emotional states that can influence the quality of couple interaction. Knowledge of such factors can help couple therapists intervene appropriately to increase positive emotional states and reduce negative emotions that interfere with constructive couple interaction.

One promising direction for identifying characteristics of partners that may influence their emotional states when interacting regarding important issues in their relationship is the assessment of basic incentive or motives. Links have been found between primary incentives which are innate to human beings (e.g., contact and sexuality needs) and experiences of positive emotions such as joy, happiness, and pleasure during interactions with others, whereas individuals' experiences of negative emotions are less associated with these natural incentives (McClelland, 1987). In turn, positive emotions have been shown to promote behavior intended to achieve fulfillment of these natural incentives. Although it seems reasonable to infer that emotions play an important mediating role in the process through which motives, such as commitment to maintaining intimate relationships, influence individuals' engagement in particular interpersonal behavior, such as constructive communication with a partner, it is surprising that this link has been explored minimally. Thus, there is a need for research on the associations among partners' interpersonal motives such as relationship commitment, their emotional states when interacting, and their subsequent communication behavior. The present study was designed to investigate these links.

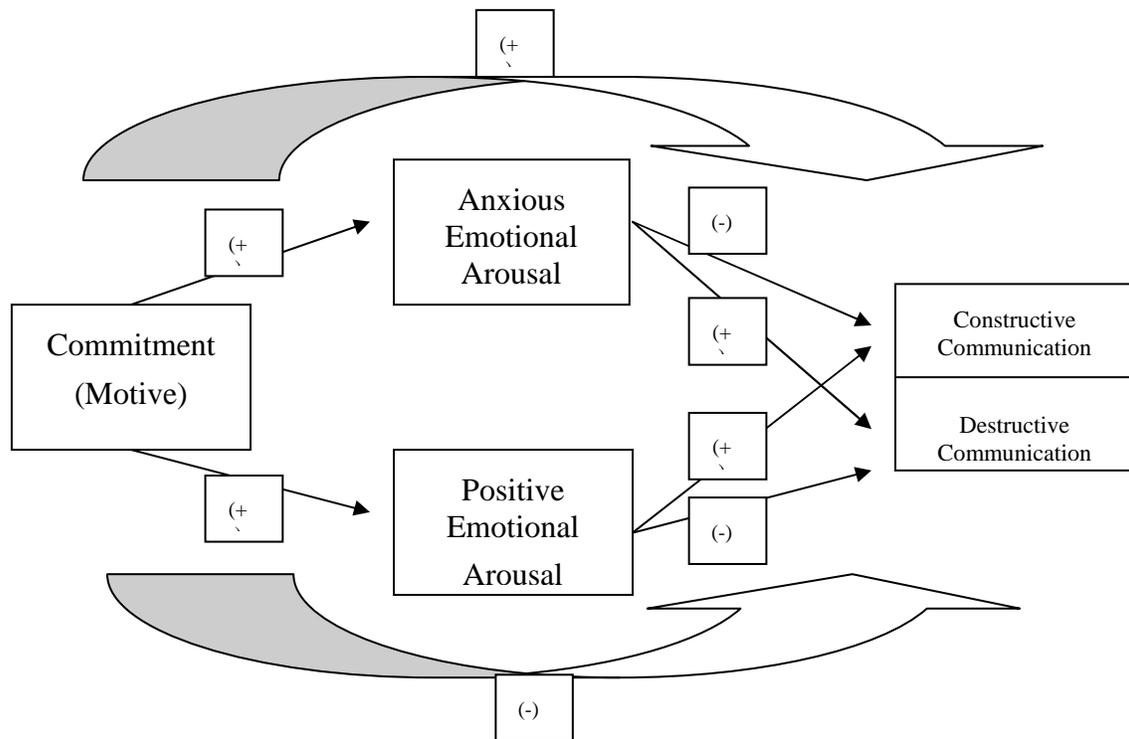
Given the importance of commitment as a motivational factor in couple

interactions and the likely link between partners' emotions and communication, the present study addressed gaps in current knowledge by investigating the relations among partners' commitment to their couple relationship, their positive and anxious emotional arousal states before discussing a conflictual topic in their relationship, and their forms of constructive and destructive communication during their discussion.

Purpose of the Study

The purpose of this study was to test the relations among partners' levels of commitment to their relationship, their positive and anxious emotional arousal when facing a discussion of an important issue in their relationship, and their communication behavior, in a sample of clinical couples. This study examined (1) whether individuals' levels of commitment are associated with their degrees of positive and anxious emotional arousal just prior to engaging in a discussion of a conflictual issue in their couple relationship, (2) whether levels of positive and anxious emotional arousal are associated with degrees of constructive and destructive communication behavior during the discussion, and (3) whether emotional arousal mediates between commitment and communication behavior.

Figure 1. Design Model for Proposed Study



This study contributes to the literature on couple communication by providing information about factors that may predict forms of communication when couples attempt to resolve relationship issues. Furthermore the examination of emotions as a possible link between commitment and communication addresses a link that has not previously been studied.

It is important to better understand the relations among commitment as an interpersonal motive, positive and anxious emotional arousal, and communication for several reasons. First, it will assist clinicians in assessing how much emphasis they should place on the development of partners' commitment to the relationship, or at least to the process of therapy, prior to engaging in teaching the couple communication skills.

It is possible that once a stronger sense of commitment in the relationship has been established, clients may be more efficient when working through their issues at home and in therapy by increasing their levels of confidence in their relationship and their desire to invest time and energy into the relationship. Secondly, this study's findings can help clinicians understand some of the influences that emotion has on a couple's ability to communicate. To the degree that emotion is associated with the couple's interaction; clinicians may consider specific interventions (e.g., motivational interviewing, relaxation techniques) that can facilitate the clients' levels of certain emotions felt prior to beginning their skills training or therapy sessions. Overall, this study has potential to add to the limited body of research on processes that influence couple communication.

Review of the Literature

Communication in Couple Relationships

Communications is a core process through which members of a couple share information and solve problems together (Baucom & Adams, 1987; Epstein & Baucom, 2002; Gottman, 1994). Whereas constructive forms of verbal and nonverbal communication can enhance partners' abilities to meet each other's needs and solve problems that they face together (Epstein & Baucom, 2002), destructive forms of communication can detract significantly from relationship satisfaction, partners' individual well-being, and the stability of intimate relationships (Baucom & Epstein, 1990; Gottman, 1994; Markman, 1984; Weiss & Heyman, 1997). One general category of destructive communication involves directing aggressive behavior (e.g., criticism, threats) toward a partner; another problematic form of communication involves verbal and nonverbal avoidance or withdrawal from the partner. Dyadic patterns of couple

communication that have become foci of research and clinical intervention include mutual aggressive communication that commonly escalates, demand/withdraw communication in which one partner pursues and the other attempts to avoid interaction, and mutual avoidance (Christensen, Eldridge, & Catta-Preta, 2006; Christensen & Heavey, 1990; Epstein & Baucom, 2002; Gottman, 1994). Patterns in which either one or both members of a couple avoid direct communication have received less attention than mutual destructive exchanges, but it is clear that more information is needed about factors that may influence partners' engagement rather than avoidance of communication when there is a need to resolve relationship problems. The present study investigates commitment and positive and anxious emotional arousal as factors that may affect couples' conflict-resolution communication.

There are a number of ways in which communication can be destructive in a couple's relationship. Some factors in destructive communication are negative affect expressed by the speaker regarding the listener, negative content of messages (e.g., criticism of the listener), and avoidance versus engagement with the partner. Individuals may choose to avoid certain topics of communication with their partners in order to prevent any possible anticipated consequences or negative emotions.

There are several forms that avoidance of a topic of discussion in a couple's communication can take; for example, an individual may change the subject of discussion, consistently interrupt their partner, engage in "turn-off" behaviors that communicate disapproval of the topic, use domineering behavior, negate or simply fail to talk about that topic, or turn away or otherwise increase physical distance (Weiss & Tolman, 1990). Frequent reasons why members of couples choose to avoid a topic of

conversation include a fear of a decline in the quality of their relationship, negative implications of any disclosure, or the topics are considered taboo (Sargent, 2002). For the sake of achieving intimacy and homeostasis in their relationship they are currently avoiding a difficult topic. This motivation to maintain harmony in the short term makes it difficult for couples to engage in forms of constructive problem-solving communication that are needed to resolve conflicts (Epstein & Baucom, 2002).

There are a variety of forms of constructive communication as well. Constructive communication factors include positive emotion conveyed regarding the partner, positive content (e.g., compliments regarding the partner, efforts toward problem-solving), and positive engagement versus avoidance. Some of the ways in which couples constructively discuss a conflictual topic are by validating the other partner, facilitating the conversation, paraphrasing, using humor, laughing and smiling, opening their body posture, touching the other partner in a positive and loving manner or using an affectionate tone of voice (Weiss & Tolman, 1990). Epstein and Baucom (2002) emphasize the importance of using constructive ways of communicating, because these positive expressive behaviors can result in positive reciprocity, or mutual positive behavior, which is particularly important for resolving relationship conflicts.

The present study focused on partners' levels of commitment to their relationship as a predictor of the degrees to which they engage in constructive and destructive forms of communication when asked to discuss a topic that has caused significant conflict in their relationship.

Motivation Theory

The guiding theory for this research was motivation theory. Motivation theory and research that supports it indicate that individuals have a variety of relatively enduring motives, involving drives to achieve goals that meet basic human needs (McClelland, 1987). Although some motives have their roots in innate needs such as hunger, attachment, and sex, other motives are developed through socialization processes beginning early in life. For example, an individual whose parents emphasized and rewarded achievement throughout his or her childhood may develop a strong motive to pursue accomplishments. Results from research involving factor analyses of a measures of a variety of motives has confirmed that there are major clusters of motives that fall into *communal* and *agentic* categories. Whereas communal motives involve the desire and goal of connection with other people, agentic motives are focused on the person's individual functioning. Examples of communal motives are affiliation, intimacy and nurturance, and examples of agentic motives are achievement, autonomy, and power (McClelland, 1987). Communal motives focus individuals' attention on valuing and seeking interaction with others. Whereas affiliation motivation involves desiring opportunities to share time and activities with others (often many others), intimacy motivation is focused on more in-depth connection at a more personal and private level with one or a small number of significant others (McClelland, 1987). In contrast, agentic motives focus the person on personal accomplishments rather than interpersonal connections. For example, an individual who has a high level of achievement motivation focuses on life experiences in which his or her efforts result in desired accomplishments.

In the present study individuals' levels of commitment to their couple relationship

were used as a measure of their intimacy motivation. It was assumed that the more an individual is motivated toward achieving and maintaining an intimate relationship with another person, the more he or she will exhibit commitment to the relationship. An individual's motive of being committed to a goal can be viewed as the internal and subjective intent to be committed (internal beliefs and motives). For the purpose of this study, each partner's commitment to their couple relationship was defined as his or her motivation to maintain the relationship. In order to fulfill the intimacy motive, the goal is to maintain a committed relationship.

Individuals' awareness of their motives may vary. According to McClelland (1987) motivation commonly involves conscious intents that a person may express to others, but outsiders also may make inferences about a person's motives on the basis of observing his or her actions in a variety of situations. Although motives are considered aspects of an individual's relatively stable personality, research also has supported the idea that particular environmental conditions are likely to elicit a person's motives and even strengthen the degree to which a motive is expressed (McClelland, 1987). For example, one person may have a generally stronger affiliation motive than another person, but the latter person's affiliation motive may increase when he or she is under stress in life.

Motivation and behavior. Motivation is strongly associated with action.

McClelland (1987) notes that individuals who have a particular motive learn over time particular ways of behaving that are likely to help them achieve the goal involved in the motive. For example, a person who has a strong affiliation motive commonly learns

social skills for making friends and uses them in situations in which potential new friends are present.

According to McClelland (1987), although a person may have a motivational intent to behave in particular ways in order to achieve a particular goal that meets his or her needs, there are several factors that may influence the person's ability to follow through and turn this intent into action. These factors include the extent to which the individual expects that a particular behavior will achieve a desired goal, the perceived difficulty of performing the behavior, and the individual's appraisal of his or her skill or ability to perform it. Similarly, Heckhausen (1991) proposed a stage model for motivation in which the individual begins with a general tendency to strive toward enacting an action that is appropriate to achieving his or her goal, assesses the desirability and feasibility of the goals, anticipates opportunities that will allow him or her to reach the goals, thinks of an appropriate time to take action, and (considering that no conflicts, doubts, or desirable alternatives arise), transforms the goal-directed plan into action. Thus, an individual who has a high level of commitment to a relationship (is motivated to maintain the relationship in order to achieve the intimacy motive) will identify behaviors that have potential to achieve that goal and be energized to engage in them depending on an appraisal of how effective his or her efforts seem likely to be toward fulfillment of that motive.

Finkel and Rusbult (2008) describe a variety of motives that drive individuals toward engaging in behavior focused on maintaining or enhancing their relationships:

Motives centering on desire to protect a relationship upon which one is deeply dependent (e.g., strong commitment); motives centering on desire

to maximize one's long term well-being by promoting congenial interaction (e.g., temporally extended positive reciprocity); motives centering on desire to benefit the outcomes of a partner with whom one's well-being is closely linked (e.g., self-other merger, such that promoting a partner's outcomes is tantamount to promoting one's own); or motives centering on desire to "do the right thing," regardless of the consequences to the self (e.g. altruism) (p. 548).

Thus, an individual who is committed to a relationship (is motivated to maintain it) is likely to engage in pro-relationship behavior, including actions that benefit the partner as well as oneself (Finkel & Rusbult, 2008).

Weigel and Ballard-Reisch (2002) conducted a study exploring the relations among relationship satisfaction, subjective commitment to the relationship, and behavioral indicators of commitment. First, the actions for the measure of commitment-oriented behaviors were identified through a self report questionnaire administered to college students, with an open-ended question asking, "What things do you do or say to show your commitment to your partner." The second part of the study used the list of behaviors that the researchers found to be more commonly listed by participants in the first part of the study, as well as Rusbult, Martz, and Agnew's (1998) commitment scale that assesses expectations of relationship continuance (Weigel & Ballard-Reisch, 2002). Weigel and Ballard-Reisch (2002) found that the commitment-oriented behaviors that were positively correlated with high levels of relationship satisfaction and overall subjective commitment to the relationship included providing affection, providing support, maintaining integrity, sharing companionship, making an effort to communicate,

showing respect, creating a relational future, creating a positive relationship atmosphere, working together on relationship problems, and expressing commitment. Further evidence that levels of commitment or level of desire to fulfill the intimacy motive increases the likelihood that partners will take actions to remain in their relationship has been found by Drigotas and Rusbult (1992), who examined commitment as a mediator between individuals' dependence on their partners and their decisions to break up their relationships. The researchers found that commitment was related to individuals' likelihood of remaining in their relationship.

In summary, theory and research indicate that individuals vary in their level of desire to fulfill the intimacy motive by maintaining in their couple relationships, and this variation in commitment or motive is related to the degree to which they engage in pro-relationship behavior with their partners. Thus, the body of findings that partners tend to reciprocate positive behavior is qualified by knowledge that each individual's contribution to relationship-maintaining or enhancing interactions can be influenced by his or her commitment to the relationship.

In the present study, the behaviors following from the motive associated with commitment to one's couple relationship were assessed in terms of constructive communication behaviors involving collaboration with the partner and efforts to resolve conflicts, actions that address both one's own and the partner's interests. Specifically, the behaviors taken by the committed individual toward achieving the goal (motive) of maintaining the relationship were assessed in terms of constructive communication (problem-solving, validation, and facilitation) during a problem-solving discussion with

the partner, whereas behaviors counter to commitment were assessed in terms of destructive communication (conflict, invalidation, and withdrawal). It was expected that the less motivated an individual is to maintain the relationship, the less he or she would engage in constructive forms of communication and the more he or she would engage in destructive forms of communication (both aggressive acts and withdrawal). However, the prediction regarding withdrawal behavior is not necessarily clear, because sometimes individuals construe withdrawal as a means of avoiding conflict that might threaten a valued relationship or an individual's strong desire for fulfillment of this motive may elicit frustration and anxiety which results in decreased levels of performance (McClelland, 1987).

Motivation and emotion. McClelland's (1987) review of research on motivation found that emotions are associated with the activation of motivation. In other words, emotional arousal is a normal part of the process that occurs once a motive is activated by situational cues that indicate that the motive is relevant (for example when an individual's achievement motive is activated during a competitive game). When an individual's motive is activated (e.g., when an individual experiences motivation to be involved in a relationship with a partner), emotional arousal occurs that energizes actions the individual has learned contribute to fulfillment of the goal associated with the motive (McClelland, 1987). The emotional arousal is the component of motivation that intensifies effort expended toward achieving the goal (McClelland, 1987).

The affiliative and intimacy motives discussed by McClelland (1987), based on a body of research on major human motives, and are primary reasons for people's need to be in a committed relationship. The affiliative and intimacy motives relate to the needs of

individuals to have a feeling of belongingness and close contact with another person, and they naturally evoke pleasure (McClelland, 1987). Emotions that arise from natural incentives such as the affiliative and intimacy motives are derived from the older part of the brain and are likely to evoke an immediate response, which may be moderated by our cognitive abilities or through our learned experiences (McClelland, 1987). Again, a motive is a goal (e.g., being connected to another person), and emotional arousal occurs when situational factors (interaction with a partner) activates the motive, eliciting learned behaviors that are functional in achieving the goal involved in the motive. The present study investigated commitment to a relationship as an index of desire to fulfill affiliative and intimacy motives, potentially resulting in emotional arousal activated during couple interaction and subsequently in problem-solving communication. The study examined the role that emotion plays as a mediator between motivation (commitment to the relationship) and communication behavior.

According to motivation theory, emotions are an important part of the “motivational system” in which they intensify an action intended to fulfill the motive, giving a person the extra affective charge that they need to take action (McClelland, 1987, p. 128). An application of this theory to the current study resulted in the hypothesis that commitment to the maintenance and success of the relationship should elicit positive emotional arousal, resulting in an increased likelihood that the individual will engage in constructive forms of communication with the partner, and a lower likelihood that he or she will engage in destructive forms of communication. However, because a high level of commitment to a relationship also may lead some individuals to be concerned about the possible risks of losing the partner, commitment may elicit

anxious emotional arousal. In this case, the anxious arousal may increase the likelihood that the individual will engage in destructive forms of communication with the partner, and a lower likelihood that he or she will engage in constructive forms of communication. Assuming that members of couples in the present sample had a strong intent to be in a committed relationship because they were a clinical sample seeking the assistance of a clinician and investing resources such as time and money into their relationship, this researcher hypothesized that to the extent that higher levels of commitment yielded greater levels of anxious emotional arousal, they would result in more destructive communication and less constructive communication. Thus, a second goal of this study was to investigate positive and anxious emotional arousal as mediating processes linking relationship commitment level and couple communication.

Emotion and Communication

Emotional arousal may have both positive and negative effects on couple communication. High levels of negative emotions such as anger and anxiety can lead to aggressive behavior or avoidance, respectively (Epstein & Baucom, 2002). Clinicians commonly work with partners on management of anger and anxiety, helping them to moderate their arousal levels in order to express themselves and listen to each other constructively. Considering the role that emotions play in motivation theory, it was expected in this study that positive emotions would provide the participants with the charge that they needed in order to focus on using more constructive communication behavior and less destructive communication behavior. Conversely, anxious emotions would provide the participants with a charge resulting in the use of avoidance tactics and other destructive communication behavior rather than constructive communication

behavior. Alternatively, anxious arousal may interfere with the individual's ability to engage in constructive communication behavior. This study examined the degree to which partners' levels of commitment are associated with greater positive and anxious emotional arousal, and whether in turn greater positive arousal is associated with degrees to which partners engage in more constructive and less destructive conflict-resolution communication, whereas greater anxious arousal is associated with degrees to which partners engage in more destructive and less constructive conflict-resolution communication.

No prior studies have examined all together couples' levels of commitment to their relationship, their emotional responses associated with interacting with each other, and their communication. In addition, even studies that have looked at the role of emotions in couple relationships have for the most part focused on negative affect rather than positive affect. Understanding the roles that emotions play in couple interactions, as well as their link to partners' levels of commitment, can provide clinicians and researchers a better picture of some of the influences that partners' individual motives and emotional experiences have on the couple relationship. Couples come to therapy looking for ways to improve their relationships, but often after experiencing much distress and many hardships. Their level of commitment at the time they initiate therapy and their emotional responses to each other may play important roles when they attempt to resolve relationship issues. This study investigated commitment and positive emotional arousal as factors affecting couples' engagement in forms of communication needed to resolve their conflicts. This study also examined the relation between anxious emotional arousal and partners' engagement in forms of communication that may interfere with the

problem solving process.

Gender, Communication Patterns, and Emotion

A number of research studies have supported clinical observations that men tend to engage in withdrawing behavior more than women do and women tend to engage in more demanding communication when they interact regarding conflicts in their relationships (e.g., Christensen, Eldridge, & Catta-Preta, 2006; Christensen & Heavey, 1990). In two studies that also assessed partners' emotional arousal during couple interactions, Verdhofstadt, Buysse, De Clercq and Goodwin (2005) investigated relations among gender, conflict structure, demand-withdraw communication, and emotional arousal. Their sample was composed of 86 Belgian couples. The researchers found that negative affect was low for husbands when the conflict involved the wife wanting a change, whereas it was greater when the husband wanted a change (Verdhofstadt et al., 2005). Furthermore, men engaged in more withdrawing behavior than demanding behavior but women engaged in an equal amount of demanding and withdrawing behavior, thus supporting previous research findings regarding the female demand/male withdraw pattern. Husbands reported lower levels of emotional arousal when they engaged in less demanding behavior and more withdrawing behavior; however, overall their affect could not be predicted by their levels of demand and withdraw behavior (Verdhofstadt et al., 2005). For wives, higher levels of withdrawal and demanding behavior both were associated with higher levels of emotional arousal. However, it is important to note that this sample was comprised of couples recruited via advertisements in magazines to be part of a research study and from recruitment in shopping areas by research assistants rather than a clinical sample in which partners had sought therapy to

deal with conflicts in their relationships. Unlike the sample used for the present study, Verdhofstadt et al. (2005) may have recruited couples for which the conflictual topics that were discussed were not very important to the well being of the relationship, and for this reason may have caused less affect in the men.

A similar study completed by Eldridge, Sevier, Jones, Atkins, and Christensen (2007) with a sample of 68 severely maritally distressed, 66 moderately depressed, and 48 nondistressed couples examined three variables (who chose the topic of discussion, distress level, and marriage length) that may affect partners' communication behavior during relationship and personal problem discussions. The findings indicated that distress level, marriage length, and topic novelty all affected couples' communication behavior. In situations in which the male was expected to change couples engaged in the traditional male withdraw/ female demand pattern. However, when women were expected to change, the pattern reversed its polarity, resulting in a male demand/ female withdraw pattern. In general distressed couples were more likely to be locked into a female demand/male withdraw communication pattern (Eldridge *et al.*, 2007). During instances in which the women selected the topic of discussion, levels of distress predicted the change in the demand/withdraw pattern, whereas when men selected the topic of discussion both level of distress and length of marriage were predictors of degrees of communication pattern role reversal (Eldridge *et al.*, 2007). The longer the length of the marriage and the more distressed the couple, the more likely they were to engage in the common female demand/male withdraw communication pattern (Eldridge *et al.*, 2007).

Therefore, previous research has found gender differences in partners' emotional arousal and communication behavior. This suggested that gender differences should be

investigated in the present study.

Hypotheses

Based on the literature reviewed, the following hypotheses were tested in this study. Each hypothesis was tested separately for females and males.

Hypothesis 1: Higher commitment to the couple relationship will be associated with higher positive emotional arousal and more anxious emotional arousal, for both men and women.

Hypothesis 2: Higher commitment to the couple relationship will be associated with higher levels of constructive communication (problem solving, validation, and facilitation), for both men and women.

Hypothesis 3: Higher commitment to the couple relationship will be associated with lower levels of destructive communication (conflict, invalidation, and withdrawal), for both men and women.

Hypothesis 4: Higher positive emotional arousal will be associated with higher levels of constructive communication during the couple's discussion of a conflictual relationship topic, for both men and women.

Hypothesis 5: Higher positive emotional arousal will be associated with lower levels of destructive communication during the couple's discussion of a conflictual relationship topic, for both men and women.

Hypothesis 6: Higher anxious emotional arousal will be associated with lower levels of constructive communication during the couple's discussion of a conflictual relationship topic, for both men and women.

Hypothesis 7: Higher anxious emotional arousal will be associated with higher levels of

destructive communication during the couple's discussion of a conflictual relationship topic, for both men and women.

Hypothesis 8: The relationship between higher levels of commitment and greater constructive communication will be mediated by the levels of positive emotional arousal and anxious emotional arousal before the couple discussion, for both men and women.

Hypothesis 9: The relationship between higher levels of commitment and lower levels of destructive communication will be mediated by the level of positive emotional arousal and anxious emotional arousal before the couple discussion, for both men and women.

No hypotheses were proposed regarding gender differences; however, tests were conducted on an exploratory basis to see if any gender differences exist for the relations among these variables.

Chapter 2: Method

Sample

This study involved a secondary analysis of data previously collected for a larger study, the Couples Abuse Prevention Program (CAPP), involving a sample of those couples who have attended the Center for Healthy Families (CHF) clinic at the University of Maryland, were screened into the CAPP study evaluating alternative forms of couple therapy for psychological and mild to moderate physical abuse, and completed assessments involving questionnaires, clinical interviews, and a 10-minute communication sample. The sample couples were from the ethnically and socio-economically diverse communities surrounding the University of Maryland, College Park.

The data for this study comprised a subset of a computer data base of demographic and assessment information from 68 heterosexual couples who attended the CHF clinic between 2001 and 2006. Individuals' data from their assessment instruments previously were entered into the database with no identifying information, and this investigator only had access to this numerical data file. This investigator did not participate in the CHF clinic as a therapist until fall of 2007 and the data accessed included data that had been collected up until the year 2006.

Couples reported being together, on average, for 6.28 years. The mean ages of the males and females were 33.30 and 30.89, respectively. Male participants reported an average yearly gross income of \$ 38,023, and women reported an average gross income of \$21,097. Couples in the study had an average of 1.16 children living in the home, with a standard variation of 1.18. Tables 1 and 2 present the racial and educational

characteristics of the sample. Table 3 presents the relationship statuses of the sample.

Table 1. Race of Sample

Race	Men		Women	
	Percent	Frequency	Percent	Frequency
White	53 %	35	47.8 %	32
African Americans	31.8 %	21	40.3 %	27
Hispanic	7.6 %	5	7.5 %	5
Native Americans	3 %	2	0 %	0
Other	4.5 %	3	4.5 %	3

Table 2. Education of Sample

Level of Education	Men		Women	
	Percent	Frequency	Percent	Frequency
Some High School	3.0 %	2	2.9 %	2
High School	19.7 %	13	7.4 %	5
Some College	33.3 %	22	27.9 %	19
Associate Degree	6.1 %	4	10.3 %	7
Bachelors Degree	10.6 %	7	13.2 %	9
Some Graduate Education	7.6 %	5	11.8 %	8
Masters Degree	13.6 %	9	19.1 %	13
Doctoral Degree	3 %	2	0 %	0
Trade School	3 %	2	7.4 %	5

Table 3. Relationship Status of the Sample

Relationship Status	Frequency	Percent
Currently Married, Living Together	39	55.7 %
Living Together, Not Married	15	21.4 %
Dating, Not Living Together	13	18.6 %
Currently Married, Separated	3	4.3 %

The information above shows that the majority of the sample was Caucasian for both men and women, followed by 30 % – 40 % African American men and women, respectively. Only 37.8 % of the men in this sample had a college degree or more, whereas 51.5 % of women in the sample had at least a college degree. Lastly, the large majority of the sample was composed of couples that are married and/or currently living together.

Measures

Commitment

Commitment in this study was conceptualized as an individual’s subjective intent and desire to remain in and work toward the persistence of the couple relationship. It was measured in terms of a composite index of the individual’s attitude about being committed to the relationship, involving his or her response to item 32 of the Dyadic Adjustment Scale (DAS; Spanier, 1976) and his or her responses to the first five items of the Marital Status Inventory (MSI; Weiss & Cerreto, 1980).

Item 32 on the Dyadic Adjustment Scale (DAS; Spanier, 1976) question asks specifically about the degree to which the individual wishes to remain in the relationship

and the degree to which he or she will work toward the success of the relationship. The DAS is comprised of four correlated subscales assessing 1) Dyadic Consensus, 2) Dyadic Satisfaction, 3) Dyadic Cohesion, and 4) Affectional Expression (Spanier, 1989). The item chosen to assess commitment is part of the Dyadic Satisfaction subscale. The Dyadic Satisfaction subscale assesses the respondent's satisfaction with the relationship and commitment to its continuance. Analyses by Spanier (1976) showed that there is a .62 correlation between item 32 and its subscale and a communality of .57 for the item in a principal component analysis of the measure. Item 32 is the only DAS item that explicitly asks about commitment to the relationship. The respondent rates their attitude regarding their relationship by selecting an option on a Likert scale ranging from 6 (very committed to wanting the relationship to succeed and dedicated to improving the relationship) to 1 (the least committed to making the relationship succeed and dedicated to improving the relationship).

The DAS was originally developed as a measure of the "quality of adjustment to marriage and similar dyadic relationships (Spanier, 1989), and while it more accurately can be described as measuring each partner's perception of the couple relationship, it has accumulated a strong record of reliability and validity as an index of overall relationship quality. The internal consistency of the total DAS and its subscales has been studied repeatedly, and the findings have been good. The Cronbach alpha reliability coefficient for the Dyadic Satisfaction subscale has been found to range from .77 to .94 (Spanier, 1989), whereas the alpha coefficient for the entire DAS ranges from .84 to .96 (Spanier, 1989); these findings suggest that this is a measure that is highly reliable. The measure also has shown temporal stability in various studies, such as a study by Stein, Girido, and

Dotzenroth (1982), in which the test-retest correlation was .96 for the total DAS and .92 for the Dyadic Satisfaction subscale. Criterion-related validity for the DAS was established in a study completed by Spanier (1976). The measure was administered to 218 married couples and 94 divorced couples and the mean total scores were 114.8 and 70.7 respectively, showing that the scale differentiates marital status groups appropriately. Many other studies have supported the concurrent and predictive validity of the DAS (Spanier, 1989). The DAS has shown convergent validity in relation to the Locke-Wallace Marital Adjustment Test and the Kansas Marital Satisfaction Scale (Spanier, 1989). The DAS can be used as an assessment of couples beginning therapy, for treatment planning, and to evaluate treatment outcome (Spanier, 1989). Item 32 was selected for the present study based on its content validity as an index of the individual's commitment to his or her couple relationship and its strong psychometric characteristics in relation the total DAS and Dyadic Satisfaction subscale.

The MSI asks the individual about steps that he or she has taken toward dissolving the couple relationship. The MSI follows a progression of thoughts and behaviors taken toward separation, escalating in levels of intensity, and is as follows: "(a) thinking about separation or divorce; (b) discussions with and inquiries to trusted friends without spouse's knowledge; (c) planning the content of active discussion with spouse (d) establishing financial independence from spouse; (e) serious planning for initiating legal action; and (f) filing for divorce" (Weiss & Cerreto, 1980, p. 81). The first five items of the Marital Status Inventory (MSI; Weiss & Cerreto, 1980) assess subjective commitment intent by asking questions regarding thoughts of separating or divorce, in contrast to the other MSI items that describe behaviors associated with low commitment (e.g., filing for

a legal separation). Thus, for the purpose of the current study only the first 5 MSI items were utilized to measure the participant's subjective intent to be in a committed relationship. The questionnaire uses a nominal response scale; the participants may answer "yes" or "no" to indicate whether or not they have engaged in such thinking or behavior. The MSI-R administered to the clients at the CHF is a revised version of Weiss and Cerreto's (1980) Marital Status Inventory created specifically for use at that clinic with the permission of Weiss. Although the MSI was originally created to help clinicians understand a couple's proximity to a legal divorce, this MSI-R is used as a measure of steps taken toward dissolving either a marital or non-marital committed relationship. The fewer actions taken toward the dissolution of the relationship considered to be a measure of the person's level of commitment to the relationship. The differences between the MSI and the MSI-R are few but significant. The format has been changed to a "yes" or "no" format from the original "true" or "false". Additional items were included, inquiring about plans to move out, costs and benefits of ending the relationship, and reaching decisions about child custody. The MSI-R was also changed to have more neutral language; language that is inclusive of all couples regardless of their current legal marital status. Lastly, the language changed for some items (5, 6, 7, 10, 11, and 13) from the original negative wording to asking the questions with positive language.

Validity for the original MSI was established by the measure's positive correlation with the client's level of distress and marital dissatisfaction (Weiss & Cerreto, 1980), as well as divorce (Crane, Soderquist, & Frank, 1995). Therefore, the MSI is considered to be a valid measure for assessing relationship distress and dissolution potential (Crane, Soderquist, & Frank, 1995; Weiss & Cerreto, 1980; Whiting & Crane,

2003). The measure's Spearman-Brown split-half reliability is .86 (Crane, Soderquist, & Frank, 1995). Studies have also confirmed the MSI's discriminant validity (Crane, Soderquist, & Frank, 1995). The Coefficient of scalability for the MSI was found to be .87, indicating that the scale is unidimensional and cumulative (Weiss & Cerreto, 1980). This measure is also correlated with couples' levels of relationship distress (Whiting and Crane, 2003). In addition, Weiss and Cerreto (1980) found that the MSI differentiated between a sample of married couples seeking therapy for child related problems and a sample of couples who sought therapy for marital problems, with the latter group scoring significantly higher. In standard use of the MSI, and the MSI-R, higher scores indicate more steps taken toward dissolving the couple relationship, and thus a lower level of commitment to the relationship. However, in the present study the MSI items were reverse-coded so that higher scores indicate higher commitment.

The index of commitment used in this study was the sum of the respondent's answers to DAS item 32 plus his or her responses to MSI-R items 1 through 5. Within the present sample, the Cronbach alphas for females and males were .66 and .76, respectively.

Positive and Anxious Emotional Arousal

This study focused on the degrees of positive and anxious emotional arousal that partners experience just prior to engaging in their discussion of a conflictual relationship topic. Positive emotional arousal involves emotional states that are stimulating, experienced as pleasant. In contrast, anxious emotional arousal involves emotional states that can also be stimulating but often are experienced as unpleasant. Positive emotional arousal and anxious emotional arousal were measured with the

items from the positive affect subscale of the Positive and Negative Affect Scales (PANAS) developed by Watson, Clark and Tellegen (1988). The PANAS was administered to couples at the Center for Healthy Families just prior to engaging in a 10-minute discussion of a conflictual topic in their relationship. Watson, Clark, and Tellegen (1988) describe positive affect (PA) as the “extent to which a person feels enthusiastic, active, and alert” (p. 1063), whereas negative affect (NA) is defined as the “subjective distress and unpleasurable engagement” (p. 1063). The PANAS includes a list of the following moods: interested, distressed, excited, upset, strong, guilty, scared, hostile, enthusiastic, proud, comfortable, irritable, alert, ashamed, inspired, nervous, determined, attentive, jittery, active, afraid, want revenge. Subjects rate each emotion on a scale from 1-5: If given a score of 1 the subjects are indicating that they are currently experiencing this emotion very slightly or not at all, 2 = a little, 3 = moderately, 4 = quite a bit, and 5 = extremely.

The PANAS has been shown to be a highly reliable measure; alpha reliability has been found to range from .84 to .87 for the Positive Affect (PA) scale and from .86 to .90 for the Negative Affect (NA) subscale. The measure has good discriminant validity, in that low correlations have been found between the NA scale and the PA scale, ranging from -.12 to -.23 (Watson, Clark, & Tellegen, 1988). The correlation between the PA and NA subscales is unaffected by time (Watson, Clark, & Tellegen, 1988). The version of the PANAS utilized by the Center for Healthy Families instructs clients to report on their emotions at that very moment, and it includes 11 items assessing positive emotions and 11 items assessing negative emotions. The PANAS scales are highly correlated with similar brief affect

measures, further supporting their concurrent validity; furthermore, it has been shown to be correlated with measures of anxiety, depression, and general psychological distress, indicating good convergent validity (Watson, Clark, Tellegen, 1988).

From the positive PANAS items, this investigator selected the following emotion items that had content consistent with this study's definition of positive emotional arousal: interest, excitement, enthusiastic, alert, determined, attentive, and active. In the current sample the Cronbach alphas for this positive emotional arousal scale were .86 and .85 for males and females, respectively. Similarly, an anxious emotional arousal subscale was constructed from the items distressed, scared, nervous, jittery, and afraid. In the current sample the Cronbach alphas for the anxious emotional arousal scale were .89 and .87 for males and females, respectively.

Constructive and Destructive Forms of Communication

Constructive and destructive forms of partners' communication were measured with the Marital Interaction Coding System – Global (MICS-G; Weiss & Tolman, 1990). The original version of this measure is the Marital Interaction Coding System (MICS; Heyman, Weiss, & Eddy, 1995). The MICS uses highly trained coders to rate a ten minute sample of a couple's interaction on 32 different codes, rating each complete thought of each partner with the set of codes. This micro-analytic version of the MICS has evolved into several versions, based on deletions and additions of coding categories, creating a priori behavior categories in order to create a better and more accurate coding system (Heyman, Robert, Weiss, & Eddy, 1995). The training of coders and the coding of

a couple's 10 minutes of communication with the MICS is highly labor-intensive and expensive, so Weiss and Tolman (1990) developed the global version of the MICS to help overcome some of those limitations. Although the global ratings capture more of the overall quality of couple interactions, one of the limitations is its inability to capture specific behavior that can be used for sequential analysis of dyadic communication (Weiss & Tolman, 1990).

The MICS-G is a global coding system in which each member of a couple is rated on three constructive forms (Problem Solving, Validation, Facilitation) and three deconstructive forms (Conflict, Invalidation, Withdrawal) of communication. This study will use data previously obtained during the original CAPP study at the Center for Healthy Families in which trained coders rated these forms of communication from video recordings of each couple engaging in a 10-minute discussion of a conflictual issue in their relationship. Coders had been trained to rate degrees of each type of communication behavior exhibited by each member of the couple during each 2-minute segment of the 10-minute discussion, based on both verbal and non verbal cues. For each form of communication raters take into account a specific action, affect, and/or non-action involved, as follows (Weiss & Tolman, 1990): Problem Solving (problem description, proposing solution, compromise, reasonableness); Validation (agreement, approval, accept responsibility, assent, receptivity, encouragement); Facilitation (positive mindreading, paraphrasing, humor, positive physical contact, smile/laugh, open posture); Withdrawal (Negotiation, no response, turn away from partner, increasing distance, erects barriers, non-contributive); Conflict (complain, criticize, negative mind reading, put downs/ insults, negative commands, hostility, sarcasm, angry/bitter voice); Invalidation

(disagreement, denial of responsibility, changing the subject, consistent interruption, turn-off behaviors, domineering behaviors).

Coders make ratings of each of the six forms of communication using a scale ranging from 0 (*none*) to 5 (*very high*) based upon content and affect cues associated with each summary category. The MICS-G manual instructs raters to consider the frequency and intensity of each behavior when assigning a 0 to 5 rating to each of several subcategories associated with a summary category such as Conflict. The subcategory ratings for each 2-minute segment of the video recording of couple communication are averaged to create a summary category rating for problem solving, validation, facilitation, conflict, invalidation, and withdrawal ranging from 0 (*none*) to 5 (*very high*). The criteria for the ratings are as follows: 0 (*none*) – no category cues observed, 1 (*very low*) – 10% or less of interaction time was involved with the specific category of behaviors, or that any of the exemplar behaviors had minimal impact, 2 (*low*) – 30% of interaction time or many behaviors of low impact, 3 (*moderate*) – 50% of interaction time or the behaviors has a considerable impact, 4 (*high*) – 70% of interaction time or many behaviors has strong impact, and 5 (*very high*) – 90% of the interaction time or few very strong instances of criterion behaviors. The five summary scores for each 2-minute segment for each of the six communication summary categories were averaged for each partner to produce six overall summary scores for both the male and female partners. These summary scores for the six forms of communication for each partner had been entered into the clinic database and were used in the present study. As is standard practice with the MICS-G, in the present study the three constructive forms of communication and three deconstructive forms of communication were summed for each subject to produce

constructive and deconstructive communication indices, respectively.

A study conducted by Weiss and Tolman (1990) compared the ratings of 24 distressed and 26 non-distressed couples completed by experienced coders who used the original micro-analytic version of the MICS and who had 25 weeks of training and over 40 weeks of coding experience, versus coders who used the MICS-G after only 10 hours of training. In terms of inter-rater reliability, level of agreement of raters using the MICS-G ranged from 78% to 91% for husbands and 83% to 93 % for wives in comparison to the MICS which was an average of 83.3% ranging from 77% to 87% suggesting that the MICS-G is just as reliable as or even more so than the MICS (Weiss & Tolman, 1990). Therefore, the MICS-G has proven itself to show high levels of inter-rater reliability even with non-experienced coders (Weiss & Tolman, 1990). Furthermore, marital adjustment scores measured with the Marital Adjustment Test (MAT; Locke & Wallace, 1959) and the Dyadic Adjustment Scale (DAS; Spanier, 1976) were more strongly correlated with the MICS-G than with the MICS for husbands (.42 and .18, respectively) and for wives (.48 and .25, respectively) which demonstrates the validity of the MICS-G as superior to that of the MICS. The MICS-G can also accurately discriminate between distressed and non-distressed couples (classified by means of the DAS) with 80% accuracy; the MICS can do this with 70% accuracy (Weiss & Tolman, 1990).

Coders who rated couples whose data were used for the present study had approximately 50 hours of training in using the MICS-G before they coded the communication samples from the couples whose data will be used in this study. Coders are interviewed and carefully selected and they meet once a week for approximately 2 hours during their first semester. During the training sessions coders are assigned

communication samples that have been previously coded. Coders complete their assignment within their own time frame but prior to the next meeting time. Once the communication samples are coded, the individual coders' scores are brought to the group. A discussion regarding the interpretations of certain behaviors and affect involved in a partner's communication act is conducted with the advanced graduate students who supervise the group of coders, to assure that the partners' communication behaviors are coded according to the standards provided in the MICS-G manual. This practice helps increase inter-rater reliability when coding the communication sample. The following semester the coders are assessed for readiness to continue this process when using the actual communication samples from the study couples. As noted above, for the purposes of the present study each partner's summary scores for the problem-solving, validation, and facilitation forms of communication that had been entered into the computer data base were summed into a constructive communication composite index. Similarly, each partner's summary scores for the conflict, invalidation, and withdrawal forms of communication were summed into a destructive communication composite index. The constructive and destructive communication composite scores were used to test the study's hypotheses. This procedure is commonly used in behavioral observation research on couple communication (Weiss & Heyman, 1997).

Procedure

This study involved accessing scores of couples from the existing database at the Center for Health Families at the University of Maryland, College Park. Partners' scores from the DAS item 32, MSI-R items 1-5, the PANAS that each partner completed just prior to engaging in their 10-minute discussion of a conflictual topic in their relationship

(identified from the partners' ratings in a written survey of level of conflict that they experience in each of 28 areas of their relationship), and the summary scores for each partner on the six forms of communication (problem solving, validation, facilitation, conflict, invalidation, and withdrawal) on the MICS-G derived from their communication sample were used in the secondary analyses in this study. The present researcher had no contact with the couples who participated in the clinic assessments from which these data were gathered, and the data file has no information that would identify the participants to the researcher.

The assessment instruments are administered during two separate days. The first set of assessment instruments includes the Dyadic Adjustment Scale (Spanier, 1996) and the revised version of the Marital Status Inventory (Weiss & Cerreto, 1980), among other measures not used in this study. The first set of questionnaires includes the Conflict Tactic Scale – Revised (CTS-2; Straus, Hamby, Boney-McCoy, & Sugarman, 1996) and the Multidimensional Measure of Emotional Abuse (MMEA; Murphy & Hoover, 2001) that are used for identifying couples' experiences of abusive behavior. In addition, during the first assessment session each partner is interviewed independently about his or her own and the other partner's substance use, as well as incidents of abusive behavior and level of fear regarding living with the partner and participating together in couple therapy.

The second assessment session occurs if a couple meets the criteria for inclusion in the CAPP program that focuses on forms of couple therapy for abusive behavior. Although the clinic changed its policy such that now all couples, whether or not they are in the CAPP program, must complete a communication sample by their second

assessment session, the present sample was comprised only of couples who had been selected for the treatment study based on screening for psychological and/or mild to moderate physical abuse. Before and after participating in the communication sample, couples fill out the PANAS. This study only used the PANAS that partners completed before they held their discussion.

During the collection of the couple's communication sample, the therapists first ask each partner to report his or her current mood states with the PANAS. The therapists then attach a lapel microphone to each partner, begin the video recording, and leave the room for ten minutes while the couple discusses a topic from the Relationship Issues Survey (RIS) that the partners completed previously and had indicated causes conflict in their relationship. The therapists observe the couple's discussion from behind a one-way mirror to monitor the possible need for intervention in the event that the discussion becomes too aggressive.

Chapter 3: Results

Overview of Data Analyses

The hypotheses regarding univariate associations between variables were tested with Pearson correlations. In addition, the degrees to which positive emotional arousal and anxious emotional arousal mediated the relations between commitment and communication behavior were tested with partial correlation analyses. Finally, possible gender differences in the relations among commitment, emotional arousal, and communication (for example, the difference between females' and males' correlations between degree of relationship commitment and level of positive emotional arousal prior to the problem-solving discussion) were tested with the test for the difference between two independent correlation coefficients.

Results for Tests of Hypotheses

Hypothesis 1: Higher commitment will be associated with higher positive emotional arousal and higher anxious arousal, for both men and women.

Pearson correlations were computed to test the associations between subjects' scores on the measure of commitment and their total score on the PANAS positive emotional arousal subscale. The correlations were .36 ($p = .002$) for females and .56 ($p < .001$) for males, both consistent with the hypothesis. The test for the difference between two correlation coefficients indicated that there was no gender difference in the magnitude of the positive association between commitment and positive emotional arousal, $z = 1.42$, $p = .16$.

Pearson correlations were computed to test the associations between subjects' scores on the measure of commitment and their total score on the PANAS anxious

emotional arousal subscale. The correlations were $-.15$ ($p = .11$) for females and $-.27$ ($p = .01$) for males, neither consistent with the hypothesis; in fact the inverse relationship for males was opposite to what had been hypothesized. Even though the correlation for the males was significantly different from zero whereas the correlation for females was not, the test for the difference between two correlation coefficients indicated that there was no gender difference in the relation between commitment and anxious emotional arousal, $z = 0.72$, $p = .47$.

Hypothesis 2: Higher commitment will be associated with higher levels of constructive communication, for both men and women.

Pearson correlations were computed to test the associations between subjects' scores on the measure of commitment and their MICS-G constructive communication composite score. These correlations were $.15$ ($p = .12$) for females and $.28$ ($p = .01$) for males. Results for the females are not consistent with the hypothesis, but those for the males are consistent with the hypothesis. Even though the correlation for the males was significantly different from zero whereas the correlation for females was not, the test for the difference between the two correlation coefficients indicated that there was no gender difference in the relation between commitment and constructive communication, $z = 0.77$, $p = .44$.

Hypothesis 3: Higher commitment will be associated with lower levels of destructive communication, for both men and women.

Pearson correlations were computed to test the associations between subjects' scores on commitment and their MICS-G destructive communication composite score. These correlations were $-.12$ ($p = .17$) for females and $-.15$ ($p = .11$) for males. Results

are not consistent with the hypothesis, with non-significant relations for both genders.

Hypothesis 4: Higher positive emotional arousal will be associated with higher levels of constructive communication, for both men and women.

Pearson correlations were computed between subjects' PANAS total positive emotional arousal score and their MICS-G constructive communication composite score. These correlations were .14 ($p = .15$) for females and .25 ($p = .03$) for males. Only the results for the male participants are consistent with the hypothesis. Even though the correlation for the males was significantly different from zero whereas the correlation for females was not, the test for the difference between the two correlation coefficients indicated that there was no gender difference in the relation between positive emotional arousal and constructive communication, $z = 0.59$, $p = .56$.

Hypothesis 5: Higher positive emotional arousal will be associated with lower levels of destructive communication, for both men and women.

Pearson correlations were computed between subjects' PANAS total positive emotional arousal score and their MICS-G destructive communication composite score. These correlations were -.14 ($p = .16$) for females and -.32 ($p = .009$) for males. Only the results for the male participants were consistent with the hypothesis. Even though the correlation for the males was significantly different from zero whereas the correlation for females was not, the test for the difference between two correlation coefficients indicated that there was no gender difference in the relation between positive emotional arousal and destructive communication, $z = 0.98$, $p = .33$.

Hypothesis 6: Higher anxious emotional arousal will be associated with lower levels of constructive communication during the couple's discussion of a conflictual relationship topic, for both men and women.

Pearson correlations were computed between subjects' PANAS total anxious emotional arousal score and their MICS-G constructive communication composite score. These correlations were $-.21$ ($p = .06$) for females and $.05$ ($p = .36$) for males. The results did not support the hypothesis, but there was a trend toward support of the hypothesis with the results for the female participants. There was no gender difference in this association.

Hypothesis 7: Higher anxious emotional arousal will be associated with higher levels of destructive communication during the couple's discussion of a conflictual relationship topic, for both men and women.

Pearson correlations were computed between subjects' PANAS total anxious emotional arousal score and their MICS-G destructive communication composite score. These correlations were $.32$ ($p = .007$) for females and $.02$ ($p = .43$) for males. Only the results for the female participants were consistent with the hypothesis. Even though the correlation for the females was significantly different from zero whereas the correlation for males was not, the test for a difference (an effect just above the $p < .10$ criterion for a trend) between the correlations indicated no significant gender difference in the relation between anxious emotional arousal and destructive communication, $z = 1.65$, $p = .10$.

Hypothesis 8: The relationship between higher levels of commitment and greater constructive communication will be mediated by the levels of positive emotional arousal and anxious emotional arousal before the couple discussion, for both men and women.

Partial correlation analyses were utilized to test the correlations between levels of commitment and subjects' MICS-G constructive communication composite score when controlling for their PANAS positive emotional arousal total score. These partial correlations were .22, $p = .10$ for men and nonsignificant for women. Because for men the original Pearson correlation between commitment and constructive communication was significant (.28, $p = .01$) but the partial correlation controlling for positive emotional arousal was not significant, there was support for the mediation hypothesis for the men. In contrast, the relation between commitment and constructive communication was not significant for women with or without taking positive emotional arousal into account.

Partial correlation analyses were utilized to test the correlations between levels of commitment and subjects' MICS-G constructive communication composite score when controlling for their PANAS anxious emotional arousal total score. These partial correlations were .32, $p = .01$ for men and nonsignificant for women. Because for men the original Pearson correlation between commitment and constructive communication was significant (.28, $p = .01$) but the partial correlation controlling for anxious emotional arousal *also* was significant, the results did not support for the mediation hypothesis for the men. The relation between commitment and constructive communication was not significant for women with or without taking anxious emotional arousal into account.

Hypothesis 9: The relationship between higher levels of commitment and lower levels of destructive communication will be mediated by the levels of positive emotional arousal and anxious emotional arousal before the couple discussion, for both men and women.

Partial correlation analyses were not utilized to test this hypothesis between levels of commitment and subjects' MICS-G destructive communication composite score when controlling for their PANAS positive emotional arousal total score and PANAS anxious emotional arousal total score, because the original Pearson correlations between commitment and subjects' MICS-G destructive communication composite score for both men and women were not significant.

Table 4. Means and Standard Deviations of MICS-G Constructive and Destructive Communication Behaviors for Men and Women

	Women's constructive communication	Women's destructive communication	Men's constructive communication	Men's destructive communication
Mean	3.04	1.49	3.23	1.33
Standard Deviation	0.99	0.97	0.94	0.92

Post-Hoc Exploratory Analyses

The constructive and destructive communication composite indices are comprised of diverse types of communication (for example, destructive communication includes criticism and invalidation, which involve actions toward the partner, as well as withdrawal, which involves action away from the partner). Consequently exploratory analyses were conducted to investigate whether commitment may be related differently to the subcategories of constructive and destructive communication. Pearson correlations indicated that for men greater commitment is associated with less conflict behavior ($r = -$

.27, $p = .04$) and greater facilitation ($r = .24, p = .02$). Furthermore, greater positive emotional arousal was associated with less conflict ($r = -.38, p = .002$), greater validation ($r = .24, p = .03$), and a trend toward greater facilitation ($r = .20, p = .06$).

Identical post-hoc exploratory analyses were computed for the women. Findings from Pearson correlations indicated that greater commitment was associated with less withdrawal ($r = -.24 p = .02$) and a trend toward greater facilitation ($r = .18 p = .07$). Greater anxious arousal was associated with greater conflict ($r = .33 p = .005$) and invalidation ($r = .23 p = .03$), as well as with less problem solving ($r = -.24 p = .03$) and facilitation ($r = -.23 p = .04$). Lastly, positive arousal showed trends toward associations with greater facilitation ($r = .20 p = .06$) and less withdrawal behavior ($r = -.19 p = .07$). There were no data to support the possibility that anxious emotional arousal may be associated with withdrawal behavior.

Table 5. Means and Standard Deviations of Individual MICS-G Behavior Categories for Women and Men

	Women		Men	
	Mean	Standard Deviation	Mean	Standard Deviation
Conflict	0.79	0.56	0.60	0.47
Problem Solving	1.30	0.34	1.33	0.38
Validation	1.07	0.46	1.18	0.43
Invalidation	0.58	0.45	0.57	0.43
Facilitation	0.67	0.39	0.71	0.35
Withdrawal	0.12	0.22	0.15	0.25

The results contradict previous literature that has indicated that men withdraw more than women during conflict interactions. In this study, women’s increased levels of commitment and positive emotional arousal were associated with lower levels of withdrawal. Anxious emotional arousal was associated with conflict, invalidation,

problem solving, and facilitation for the women, whereas for men there were no trends or statistically significant associations suggesting any link between anxious emotional arousal and different types of communication behavior. This suggests that anxious emotional arousal did not play a role in the males' communication behavior; however it is possible that the anxious emotional arousal indices used in this study did not properly capture the emotions of the male participants. Men may have also been socialized to not express certain emotions, particularly those that may be related to expression of fear.

Chapter 4: Discussion

Findings

The results of this study indicated that for both men and women the higher the level of an individual's commitment to their couple relationship the more they experienced positive emotional arousal just prior to discussing a conflictual topic with their partner and for men the less anxiety they experienced as well (for women the effect for anxiety was in the same direction but not significant). The findings for positive emotional arousal are consistent with the literature that describes how a motive such as the intimacy motive involves a desired goal of connection to another person and the activation of arousal when the motivated person is in a situation in which fulfillment of the goal is possible. The present study placed members of couples in a situation (a discussion with their partner of an important topic regarding their couple relationship), and the more committed they were to the relationship, the more positive arousal (e.g., alertness, excitement) they experienced before the discussion. Consistent with motivation theory (McClelland, 1987), more committed individuals were more primed to engage in the discussion that was relevant for the well-being of their relationship. However, another

possible explanation for this finding is that people are more committed to relationships that have been characterized by more positive couple interactions, so when they anticipate another discussion with their partner, they experience positive emotions.

The finding that commitment was unrelated to anxious arousal for women and negatively related to anxious arousal for men was the opposite of the relationship that had been hypothesized based on the idea that greater commitment to the relationship increased the importance of the couple's discussion of their relationship issue and potential danger if the discussion did not go well. One possible explanation for this unexpected finding is that the anxiety does not set in until after the couple engages in the discussion of the conflictual topic, rather than in anticipation of the upcoming discussion. Alternatively, although the original hypothesis was based on the idea that the participants who are highly committed have more to lose and are therefore more anxious, individuals who are more highly committed may feel more comfortable discussing a conflictual topic; in their eyes the possible dissolution of their relationship due to a brief 10-minute discussion seems unlikely. Men, when a discussion is not perceived as too aversive and withdraw, are often oriented toward problem-solving therefore this discussion may elicit positive emotions as they can possibly reach a resolution to one of their concerns. For women, who are often pursuers when issues exist in their couple relationships (Christensen & Heavey, 1990; Verdhofstadt et al., 2005), a discussion of a conflictual topic may not arouse any anxious emotion due to their level of comfort in this situation. However, neither may they expect that the issue will be easily resolved, and therefore they may not experience any positive emotional arousal associated with their level of commitment.

Greater commitment in men also was found to be associated with more constructive communication behaviors during the couple discussion, but this hypothesized relation was not found for women. This partly supports theory and previous research by Finkel and Rusbult (2008) that found that those who are committed to a relationship engage in pro-relationship behaviors that have the potential to maintain or enhance the quality of their relationship. However, the lack of support of the hypothesis regarding women's data does not support previous research. It is important to consider that previous studies such as that by Finkel and Rusbult (2008) were conducted with non-clinical samples. There is a possibility that the couples who seek assistance at the Center for Healthy Families for relationship problems engage in behavior that is different from that exhibited by couples recruited via magazine ads. There is prior evidence that women in distressed relationships commonly engage in negative communication behavior toward their partners (Epstein & Baucom, 2002), so the women in the present sample may be engaged in behavioral patterns (either constructive or destructive) that are no longer guided by levels of commitment but rather are dominated by maladaptive communication behavior that commonly develops when members of couples become frustrated and angry with each other.

In contrast to the gender findings for positive arousal and communication, the results for women but not for men indicated a trend for support for the hypothesis that greater levels of anxious arousal will be associated with less constructive communication and a significant relation between their anxious arousal and more destructive communication. These findings for women are consistent with the literature indicating that anxiety can lead to a variety of maladaptive behaviors such as avoidance and

aggressive behaviors (Epstein & Baucom, 2002), as well as with prior findings that women are more motivated than men are by relationship distress to raise and address conflict in their intimate relationships (Verdhofstadt et al., 2005). Alternatively, considering that this sample is composed of couples who have some history of engaging in psychologically and/or physically aggressive behavior, the couples in our sample are likely to be highly conflictual. For many couples this may be their last opportunity to make their relationship work. This therapy setting and communication sample could also be a safe setting for women to be able to share their perspectives, and therefore they use this space to pursue discussions that they may have otherwise not have felt safe engaging in outside of the therapy room.

Regarding the hypothesis that positive emotional arousal serves as a mediator between commitment and constructive communication behaviors, the present findings found support among the men; however, anxious emotional arousal does not serve as a mediator between commitment and destructive communication. As proposed by McClelland (1987), positive emotions increase the likelihood of action and pursuit of goals. It is important to note that there was no significant correlation between women's level of commitment and anxious emotional arousal either. A weaker relationship between commitment and emotional arousal among women in this study of clinical couples is a possible explanation for the findings. It is possible that the measures were not sensitive enough to capture women's emotions, or women in this sample for some reason experienced less emotion than expected prior to discussing issues with their partners. The finding that anxious emotional arousal was not a mediator between the participant's level of commitment and communication behavior does not support the literature which states

the when completing a challenging task, in this case resolving a conflict, emotions such as anxiety and frustration can get in the way of task completion (McClelland, 1987). However, if the task is simple, these same emotions can increase levels of productivity when completing a task (McClelland, 1987). Regardless of whether or not the task involved resolving a conflict with the intent of being in a committed relationship, the findings do not show anxious emotional arousal as defined in this research to be a mediator.

According to McClelland (1987) there are several factors that influence a person's expression of his or her motives other than emotions: the extent to which the individual expects that a particular behavior will achieve a desired goal, the perceived difficulty of performing the behavior, and the individual's appraisal of his or her skill or ability to perform it. Considering that this is a clinical sample, it seems likely that for many partners their behavior is influenced less by emotional arousal than by other factors (e.g., a belief about the likelihood that particular behavior will help achieve goals). They may not follow the process described above by McClelland as the general population does because they may not believe that things can improve or that they can achieve their goal on their own; hence they come to therapy.

There is also support in the men's data for the hypothesis that positive emotional arousal is associated with greater constructive communication behavior and less destructive communication behavior. However, it also supports the findings that positive emotions are more likely to result in actively pursuing one's goal of being in a committed relationship by engaging in positive forms of communication.

In regard to the characteristics of the sample, it is important to note that over 55%

of the sample was currently married, have been together an average 6.28 years and have an average of 1.16 children in the home. These couples may experience an additional level of permanence in the relationship that may be contributing to the lack of anxious emotional arousal. This could also be influencing other factors such as their degree of positive emotional arousal. Considering that this is a clinical sample, these couples are more likely to experience disillusionment with their relationship. At this point the newness of their relationship has decreased significantly, and especially if the couple has children, relationship satisfaction may have decreased. All of these variables can increase the likelihood of these couples engaging in conflict and using destructive communication patterns.

Limitations of the Study

The study is based on a clinical sample, therefore making it difficult to generalize this information to the general public. However, it does provide a wealth of information to clinicians about the importance of managing emotions in the therapy room, and about relations among commitment, emotional arousal and couple communication. The value of research lies in its generalizability because of the diversity of subjects. This sample was derived from a varied population across socio economic status and ethnicity. However, this clinical sample was composed of primarily couples that have had some history of mild abuse. In the beginning of the CAPP study only the couples who were allowed into the study had to complete a communication sample, and therefore the data include primarily couples with a history of at least some domestic abuse. Another explanation is that the male participants may have not been honest in their report and during their communication sample because they were trying to conceal what happens in the

household.

The sample size of 68 couples also is a limitation, restricting the statistical power available to detect significant relationships among variables. Clearly, this study should be replicated with a larger sample.

In regard to the measures used in this study, one of the reasons that anxiety was not found to be a mediator may be due to the fact that the PANAS as used in this study measures emotions experienced prior to the couple's conversation rather than during or after. The anxiety may have been experienced by the participants during or after the conversation took place. Further experiments should include assessment of partners' emotional states during and after their interaction as well. Another limitation involves the creation of positive and anxious arousal subscales from the PANAS for this study. There are no previous studies that can verify the validity and reliability of the subscales created. Some of the emotions chosen may not correctly be descriptive of anxious emotional arousal or positive emotional arousal. The commitment index also is a combination of items from two measures, and their combined reliability and validity has not been empirically verified.

Generally, the main limitation with self report measures is the possibility that people may not be honest in their reports or may be unable to complete the form accurately. People may be responding on the form in ways that they believe will please the researcher's expectations. They could also be misrepresenting their behavior unintentionally; some participants may have lacked the personal awareness and skills necessary to accurately describe their emotions. Observational measures can partly help avoid this problem, because it is a third party interpreting the behavior. However, there is

also the possibility that with observational measures the coders cannot properly interpret some of the behaviors. In addition, participants may not be enacting accurately the communication patterns that they would be utilizing in the privacy of their home; participants are aware that they are in a lab setting and are being video taped. They could be on their best behavior or exaggerating their reactions. The coders also may have a different perception of a behavior, compared to the members of a couple that they are observing. For example, whereas a partner may put their hands on their chin to express that they are listening, a coder may interpret this as the individual setting up a physical barrier.

Implications

Implications for Research

It appears that positive emotional arousal is an important driving force for positive communication behavior. The importance of positive emotion and commitment in men has not been studied thoroughly. Further studies on this should include detailed studies of men's emotional responses and subsequent behavior. Women's anxiety should also be studied further. It seemed to have a large affect on their response during the discussion of a conflictual topic. It would be interesting to do some qualitative studies exploring the reasons for women's high level of anxiety and how it results in destructive communication. It is also important to explore the role of the way women may have been socialized to experience more anxiety. As well as the origin of the anxiety; it stems from possibility of losing their partner or from fear of possible abuse that may result from the conversation.

It would also be interesting to include a measure that assessed the reason(s) for

the individual's commitment to the couple relationship. Identifying whether it was an approach commitment (based on factors that make the relationship attractive) or an avoidance commitment (based on an assessment of costs of leaving the relationship), exploring if the type of commitment elicited different emotional responses, and examining the types of communication behavior that those emotional responses elicited would be important directions to pursue in future research. On the basis of research by Weigel and Ballard-Reisch (2002), who found that the commitment-oriented behaviors were positively correlated with high levels of relationship satisfaction and overall subjective commitment to the relationship, another important piece of information that should be explored further is the degree to which emotional arousal and communication are linked to each partner's level of relationship satisfaction. Unlike the study by Eldridge *et al.* (2007) that only addressed the association between levels of relationship satisfaction and demand/withdraw communication patterns, it would be interesting to explore whether relationship satisfaction is related to emotional arousal and a variety of forms of communication behavior. Relationship satisfaction may help account for the gender differences in emotional arousal and communication. It would also be important to replicate this study within the context of couples who are generally satisfied in their relationship and with a non-clinical sample as well, so that it can be generalizable to the general population as well as provide useful information for clinicians.

Couples who attend the clinic in which the data for this study were collected are given a little bit of information regarding the original CAPP study. More importantly, those couples that pay attention to the fact that CAPP stands for "Couple Abuse Prevention Program" may be aware that the researcher is looking for signs of abuse, and

therefore alter their behavior during the communication sample and when completing the forms.

Future studies should put more of an emphasis on the ways that gender affects communication, emotions, and commitment. Both in a clinical and non-clinical setting, research with the focus on gender differences would be useful. An ideal study also would compare a non-clinical to a clinical sample to help clinicians better identify possible communication or emotion patterns that may be affecting the couple.

Implications for Clinical Practice:

Considering the level of importance that previous literature has found in emotions and the ways they prepare and impel or inhibit a person's actions, influence how individuals perceive situations, and when expressed influence recipients' responses (Sanford, 2005), addressing emotions in the therapy room is of significant concern. According to the findings in this study, it appears that generally men who are committed to a relationship and experience positive emotions are more likely to validate their female partners and facilitate the conversation of a conflictual topic. Therefore, addressing these two variables (men's commitment and positive emotions) at the beginning of therapy and building on men's levels of commitment and positive emotions by complimenting them may help promote more positive interaction in the therapy sessions. Often the focus of therapy is what is not working well in the relationship, but continuously returning to positive emotions that are experienced by both partners can remind the clients that those positive emotions still exist in their relationship and can simultaneously increase the likelihood that the man will engage in constructive communication behaviors.

There are numerous interventions that may help increase positive emotions and

positive exchanges between partners, such as discussing the beginning of the relationship, how they met, and what attracted them to each other. Many therapists also direct couples to establish “caring days” and engage in gift giving (Sherman & Fredman, 1986). But therapists also can, in an even more straightforward fashion, have the couple follow the steps that Sherman and Fredman (1986) have outlined for positive exchanges: “Identify clearly and specifically what each person wants. State these wants in a direct, positive way rather than stating what is not wanted. Surprise the spouse regularly with positive behavior.” It is particularly important that the recommended activities are stated in positive terms and are very specific. The goal is to have the couple compete against each other in these positive exchanges. These positive exchanges can make a big difference in the lives of couples whose relationship may have been characterized by negativity for an extended period of time. Findings to this research suggests that positive interactions are likely to increase constructive communication behaviors in men; hopefully engaging the male partner in the therapy and helping him get into a healthy positive emotional state may interrupt their negative communication cycle and increase productivity in the therapy room.

Therapists should remember the importance of emotions in intimate relationships for men as well as for women. It can be easy for the therapist to focus on the emotions that the women are experiencing because they are often more open in discussing emotions; however, the focus should be equal between men and women. Epstein and Baucom (2002) make recommendations for dealing with emotions in the therapy room. First by creating a safe environment for experiencing and expressing emotions; the therapist must validate the client’s experience and teach the individuals how to do the

same for their partner. The therapist can ask questions to inquire about the client's emotional experiences, thus amplifying them and even taking them a step further by interpreting or reflecting possible implied emotions (Epstein & Baucom, 2002).

Techniques as simple as repeating key words or phrases and using nonverbal communication can be used to emphasize a point, communicate care and attentiveness, and enhance a specific emotion tone in the therapy room (Epstein & Baucom, 2002).

The clinician must inquire about the cause of men's positive emotional arousal by asking men about aspects of their couple relationship that elicit positive emotional arousal. The beginning of sessions should start with the couple discussing the things that often get them to experience those positive emotions, and homework exercises should include engagement in some of these activities. Therapists should also remember to assess women's levels of anxiety. Relaxation techniques may help them to be more relaxed when discussing important conflictual topics in therapy and in the home. Considering that an individual's general affectivity can affect the relationship atmosphere, it is important for clinicians to assess if a person's general negative or positive affectivity is due to the relationship history or his or her personality trait (Baucom & Epstein, 2002).

The couples in this sample, due to the likelihood of being involved in a highly conflictual relationship, may have viewed therapy as the last chance toward saving their relationship. This type of pressure may increase levels of anxious arousal and interfere with their ability to engage in constructive communication as is instructed by the therapist. The clinician must take this into consideration as contract with the clients that for the time they are committed to the therapeutic process they will not end the

relationship. This can ease some of their anxious emotional arousal and help them focus on the task at hand.

The importance of teaching communication skills must be emphasized with all couples who arrive at the therapy room. As McClelland (1987) notes, once there is a desire to fulfill a motive, an emotional arousal occurs that energizes actions that the individual has learned contribute to fulfillment of the goal associated with the motive. However, if the individuals in the relationship never learned the actions that contribute to achieving a healthy committed relationship, unresolved conflicts in the relationship can negatively affect the couple. Couple communication can be improved through homework assignments, addressing cognitive distortions (such as generalizations and all or nothing thinking), and teaching clients how to be active listeners and empathetically respond to their partner's concerns.

Awareness of the process and the variables that affect couple interactions is an important aspect of a systems perspective, and research that investigates such processes is important for the expansion of our field so that clinicians can be better equipped to help their clients. This type of research can help clinicians provide an appropriate balance in the therapy room when they are attempting to manage clients' emotions and implement other necessary interventions. It is clear that positive emotions, communication skills, and commitment are important aspects of couple relationships that should be attended to in couple therapy.

Appendices

Appendix A



Revised – For Couples Within Families Only

DAS (ASSESSMENT)

Gender: _____ Date of Birth: _____ Therapist Code: _____ Family Code: _____

Most persons have disagreements in their relationship. Please indicate below the approximate extent of agreement or disagreement between you and your partner for each item on the following list. Place a checkmark (✓) to indicate your answer.

	<i>Always Agree</i>	<i>Almost Always Agree</i>	<i>Occasionally Disagree</i>	<i>Frequently Disagree</i>	<i>Almost Always Disagree</i>	<i>Always Disagree</i>
1. Handling family finances						
2. Matters of recreation						
3. Religious matters						
4. Demonstrations of affection						
5. Friends						
6. Sex relations						
7. Conventionality (correct or proper behavior)						
8. Philosophy of life						
9. Ways of dealing with parents and in-laws						
10. Aims, goals, and things believed important						
11. Amount of time spent together						
12. Making major decisions						
13. Household tasks						
14. Leisure time interests and activities						
15. Career decisions						

	<i>All the time</i>	<i>Most of the time</i>	<i>More often than not</i>	<i>Occasionally</i>	<i>Rarely</i>	<i>Never</i>
16. How often do you discuss or have you considered divorce, separation or terminating your relationship?						
17. How often do you or your partner leave the house after a fight?						
18. In general, how often do you think that things between you and your partner are going well?						
19. Do you confide in your partner?						

(Over)

	<i>All the time</i>	<i>Most of the time</i>	<i>More often than not</i>	<i>Occasionally</i>	<i>Rarely</i>	<i>Never</i>
20. Do you ever regret that you married (or lived together)?						
21. How often do you or your partner quarrel?						
22. How often do you and your partner "get on each others' nerves"?						

HOW OFTEN WOULD YOU SAY THE FOLLOWING EVENTS OCCUR BETWEEN YOU AND YOUR MATE?
CIRCLE YOUR ANSWER.

23. Do you kiss your partner?	EVERYDAY	ALMOST EVERYDAY	OCCASIONALLY	RARELY	NEVER	
24. Do you and your partner engage in outside interests together?	ALL OF THEM	MOST OF THEM	SOME OF THEM	VERY FEW OF THEM	NONE OF THEM	
25. Have a stimulating exchange of ideas?	NEVER	LESS THAN ONCE A MONTH	ONCE OR TWICE A MONTH	ONCE OR TWICE A WEEK	ONCE A DAY	MORE OFTEN
26. Laugh together?	NEVER	LESS THAN ONCE A MONTH	ONCE OR TWICE A MONTH	ONCE OR TWICE A WEEK	ONCE A DAY	MORE OFTEN
27. Calmly discuss something?	NEVER	LESS THAN ONCE A MONTH	ONCE OR TWICE A MONTH	ONCE OR TWICE A WEEK	ONCE A DAY	MORE OFTEN
28. Work together on a project?	NEVER	LESS THAN ONCE A MONTH	ONCE OR TWICE A MONTH	ONCE OR TWICE A WEEK	ONCE A DAY	MORE OFTEN

THESE ARE SOME THINGS ABOUT WHICH COUPLES SOMETIMES AGREE AND SOMETIMES DISAGREE. INDICATE IF EITHER ITEM BELOW CAUSES DIFFERENCES OF OPINION OR HAVE BEEN PROBLEMS IN YOUR RELATIONSHIP DURING THE PAST FEW WEEKS. CHECK "YES" OR "NO."

29. Being too tired for sex. Yes ___ No ___
30. Not showing love. Yes ___ No ___

31. The dots on the following line represent different degrees of happiness in your relationship. The middle point, "happy," represents the degree of happiness of most relationships. Please circle the dot which best describes the degree of happiness, all things considered, of your relationship.

.
EXTREMELY UNHAPPY	FAIRLY UNHAPPY	A LITTLE UNHAPPY	HAPPY	VERY HAPPY	EXTREMELY HAPPY	PERFECT

32. Which of the following statements best describes how you feel about the future of your relationship? Check the statement that best applies to you.

- ___ 6. I want desperately for my relationship to succeed, and would go to almost any length to see that it does.
- ___ 5. I want very much for my relationship to succeed, and will do all I can to see that it does.
- ___ 4. I want very much for my relationship to succeed, and will do my fair share to see that it does.
- ___ 3. It would be nice if my relationship succeeded, but I can't do much more than I am doing now to help it succeed.
- ___ 2. It would be nice if my relationship succeeded, but I refuse to do any more than I am doing now to keep the relationship going.
- ___ 1. My relationship can never succeed, and there is no more that I can do to keep the relationship going.

Appendix B



MSI-R (ASSESSMENT)

Gender: _____ Date of Birth: _____ Therapist Code: _____ Family Code: _____

We would like to get an idea of how your relationship stands right now. Within the past four months have you...

- Yes __ No __ 1. Had frequent thoughts about separating from your partner, as much as once a week or so.
- Yes __ No __ 2. Occasionally thought about separation or divorce, usually after an argument.
- Yes __ No __ 3. Thought specifically about separation, for example how to divide belongings, where to live, or who would get the children.
- Yes __ No __ 4. Seriously thought about the costs and benefits of ending the relationship.
- Yes __ No __ 5. Considered a divorce or separation a few times other than during or shortly after a fight, but only in general terms.
- Yes __ No __ 6. Made specific plans to discuss separation with your partner, for example what you would say.
- Yes __ No __ 7. Discussed separation (or divorce) with someone other than your partner (trusted friend, minister, counselor, relative).
- Yes __ No __ 8. Discussed plans for moving out with friends or relatives.
- Yes __ No __ 9. As a preparation for living on your own, set up an independent bank account in your own name to protect your interest.
- Yes __ No __ 10. Suggested to your partner that you wish to have a separation.
- Yes __ No __ 11. Discussed separation (or divorce) seriously with your partner.
- Yes __ No __ 12. Your partner moved furniture or belongings to another residence.
- Yes __ No __ 13. Consulted an attorney about legal separation, a stay away order, or divorce.
- Yes __ No __ 14. Separated from your partner with plans to end the relationship.
- Yes __ No __ 15. Separated from your partner, but with plans to get back together.
- Yes __ No __ 16. File for a legal separation.
- Yes __ No __ 17. Reached final decision on child custody, visitation, and division of property.
- Yes __ No __ 18. Filed for divorce or ended the relationship.

Appendix C



PANAS-PRE (RESEARCH)

Gender: _____ Date of Birth: _____ Therapist Code: _____ Family Code: _____

This scale consists of a number of words that describe different feelings and emotions. Read each item and then mark the appropriate answer in the space next to that word. Select the number from the scale that shows your feelings towards/about your partner **at this very moment.**

1	2	3	4	5
very slightly or not at all	a little	moderately	quite a bit	extremely

- | | |
|----------------------|-----------------------|
| ____ 1. interested | ____ 12. irritable |
| ____ 2. distressed | ____ 13. alert |
| ____ 3. excited | ____ 14. ashamed |
| ____ 4. upset | ____ 15. inspired |
| ____ 5. strong | ____ 16. nervous |
| ____ 6. guilty | ____ 17. determined |
| ____ 7. scared | ____ 18. attentive |
| ____ 8. hostile | ____ 19. jittery |
| ____ 9. enthusiastic | ____ 20. active |
| ____ 10. proud | ____ 21. afraid |
| ____ 11. comfortable | ____ 22. want revenge |

References

- Baucom, D.H., & Adams, A. (1987). Assessing communication in marital interaction. In K.D. O'Leary (Ed.), *Assessment of marital discord* (pp. 139-182). Hillsdale, NJ: Lawrence Erlbaum.
- Christensen, A., Eldridge, K., & Catta-Preta, A.B. (2006). Cross-cultural consistency of the demand/withdraw interaction pattern in couples. *Journal of Marriage and Family, 68*, 1029-1044.
- Christensen, A., & Heavey, C. L. (1990). Gender and social structure in demand/withdraw pattern of marital conflict. *Journal of Personality and Social Psychology, 59*, 73-81.
- Coats, A., & Blanchard-Fields, F. (2008). Emotion regulation in interpersonal problems: The role of cognitive-emotional complexity, emotion regulation goals, and expressivity. *Psychology and Aging, 23*, 39-51.
- Crane, D. R., Soderquist, J. N., & Frank, R. L. (1995). Predicting divorce at marital therapy intake: A preliminary model. *The American Journal of Family Therapy, 23*, 227-236.
- Doss, B., Simpson, L., & Christensen, A. (2004). Why do couples seek marital therapy? *Professional Psychology: Research and Practice, 35*, 608-614.
- Drigotas, S. & Rusbult, C. (1992). Should I stay or should I go? A dependence model of breakups. *Journal of Personality and Social Psychology, 62*, 62-87.
- Eldridge, K., Sevier, M., Jones, J., Atkins, D., & Christensen, A. (2007). Demand-withdraw communication in severely distressed, moderately distressed, and

nondistressed couples: Rigidity and polarity during relationship and personal problem discussions. *Journal of Family Psychology*, 21, 218-226.

Epstein, N.B. (1999). *The Relationship Issues Survey: A measure of areas of couple conflict*. Department of Family Studies, University of Maryland, College Park.

Epstein, N.B., & Baucom, D.H. (2002). *Enhanced cognitive-behavioral therapy for couples: A contextual approach*. Washington, DC: American Psychological Association.

Felmlee, D., Sprecher, S., & Bassin, E. (1990). The dissolution of intimate relationships: A hazard model. *Social Psychology Quarterly*, 53, 13-30.

Frank, E., & Brandstatter, V. (2002). Approach versus avoidance: different types of commitment in intimate relationships. *Journal of Personality and Social Psychology*, 82, 208-221.

Finkel, E. J. & Rusbult, C. E. (2008). Prorelationship motivation: An interdependence theory analysis of situations with conflicting interests. In J. Shah & W. Gardner (Eds.), *Handbook of motivation science* (pp. 295-307). New York: Guilford Press.

Gottman, J.M. (1994). *What predicts divorce? The relationship between marital processes and marital outcomes*. Hillsdale, NJ: Lawrence Erlbaum.

Greenberg, L. S. & Goldman, R. N. (2008). *Emotion-focused couples therapy*. Washington DC: American Psychological Association.

Heckhausen, H. (1991). *Motivation and action*. Berlin, Germany: Springer-Verlag.

Heyman, R., Eddy, J., Weiss, R., & Vivian, D. (1995). Factor analysis of the marital interaction coding system (MICS). *Journal of Family Psychology*, 9, 209-215.

Heyman, R.E., & Neidig, P. H. (1997). Physical aggression in couples treatment. In

W.K. Halford & H.J. Markman (Eds.), *Clinical handbook of marriage and couples intervention* (pp. 589-617). Chichester, UK: Wiley.

La Taillade, J.J., Epstein, N.B., & Werlinich, C.A. (2006). Conjoint treatment of intimate partner violence: A cognitive behavioral approach. *Journal of Cognitive Psychotherapy, 20*, 393-410.

Lydon, J. (1996). Toward a theory of commitment. *The psychology of values: The Ontario symposium, Vol. 8* (pp. 191-213). Hillsdale, NJ: Lawrence Erlbaum.

Markman, H.J. (1984). The longitudinal study of couples' interactions: Implications for understanding and predicting the development of marital distress. In K. Hahlweg & N.S. Jacobson (Eds.), *Marital interaction: Analysis and modification* (pp. 253-281). New York: Guilford Press.

McClelland, D. (1987) *Human Motivation*. New York: Cambridge University Press.

Meyer, J., Allen, N., & Smith, C. (1993). Commitment to organizations and occupations: Extension and test of a three-component conceptualization. *Journal of Applied Psychology, 78*, 538-551.

Murphy, C., & Hoover, S. (2001). Measuring emotional abuse in dating relationships as a multifactorial construct. *Psychological abuse in violent domestic relations* (pp. 29-46).

Sanford, K. (2003). Expectancies and communication behavior in marriage: Distinguishing proximal-level effects from distal-level effects. *Journal of Social and Personal Relationships, 20*, 391-402.

Sanford, K. (2005). Attributions and anger in early marriage: wives are event-dependent and husbands are schematic. *Journal of Family Psychology, 19*, 180-188.

- Sargent, J. (2002). Topic avoidance: Is this the way to a more satisfying relationship? *Communication Research Reports, 19*, 175-182.
- Sheras, P. & Koch-Sheras, P. R. (2006). *Couple power therapy: building commitment, cooperation, communication, and community in relationships*. Washington, DC: American Psychological Association.
- Sherman, R & Fredman, N. (1986). *Handbook of structured techniques in marriage and family therapy*. New York: Brunner/Mazel.
- Spanier, (1976). Measuring dyadic adjustment: New scales for assessing the quality of marriage and similar dyads. *Journal of Marriage and Family, 15*-28.
- Spanier (1989). *Manual for the dyadic adjustment scale*. Toronto, Ontario: Multi-Health Systems, Inc.
- Stanley, S. M., Lobitz, W. C. & Dickson, F. (1999). Using what we know: Commitment and cognitions in marital therapy. In J. M. Adams & W. H. Jones (Eds.), *Handbook of interpersonal commitment and relationship stability*, (pp. 379-406). New York: Kluwer Academic/Plenum.
- Straus, M.A., Hamby, S.L., Boney-McCoy, S., & Sugarman, D.B. (1996). The Revised Conflict Tactics Scales (CTS2): Development and preliminary Psychometric data. *Journal of Family Issues, 17*, 283-316.
- Thompson-Hayes, M. & Webb, L. M. (2004). Commitment under construction: A dyadic and communicative model of marital commitment. *The Journal of Family Communication, 4*(3&4), 249-260.
- Verhofstadt, L., Buysse, A., De Clercq, A., & Goodwin, R. (2005, July). Emotional Arousal and Negative Affect in Marital Conflict: The Influence of Gender,

- Conflict Structure and Demand-Withdrawal. *European Journal of Social Psychology*, 35(4), 449-467.
- Watson, D., Clark, L., & Tellegen, A. (1988). Development and validation of brief measures of positive and negative affect: The PANAS scales. *Journal of Personality and Social Psychology*, 54, 1063-1070.
- Weigel, D., & Ballard-Reisch, D. (2002). Investigating the behavioral indicators of relational commitment. *Journal of Social and Personal Relationships*, 19, 403-423.
- Weiner, B. (1986) *An attributional theory of motivation and emotion*. New York: Springer-Verlag.
- Weiss, R. L., & Cerreto, M. C (1980). The marital status inventory: Development of a measure of dissolution potential. *American Journal of Family Therapy* 8, 80-85.
- Weiss, R.L., & Heyman, R.E. (1997). A clinical-research overview of couples' interactions. In W.K. Halford & H.J. Markman (Eds.), *Clinical handbook of marriage and couples interventions* (pp. 13-41). Chichester, UK: Wiley.
- Weiss, R. L. & Tolman, A. O. (1990). Training manual for observers. *Marital coding system – Global (MICS-G)*, Oregon Marital Studies Program.
- Whiting, J., & Crane, D. R. (2003). Distress and divorce: Establishing cutoff scores for the marital status inventory. *Contemporary Family Therapy*, 25, 195- 205.
- Wieselquist, J., Rusbult, C. E., Foster, C. A., & Agnew, C. R. (1999). Commitment, pro-relationship behavior, and trust in close relationship. *Journal of Personality and Social Psychology*, 77, 942-966.