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DIFFERENCES, DISCORD, AND DISSOLUTION

“Marriage is one long conversation, checkered by disputes.”

(Stevenson, 1908, p. 189)

The Robert Louis Stevenson quote above captures the fact that all marriages and long-term relationships go through difficult times. One of the beliefs I have to counter with some couples is that disagreement is dysfunctional. Once people think about it rationally, they recognize that of course partners will disagree simply because they're different people. How boring would relationships be if there were no disagreements? Think for a moment about one of your favorite teachers. I would guess that your favorite teacher was one who challenged you. You're probably picturing a teacher who didn't simply give you a good grade, but one who let you know that you could do better and inspired you to improve. Now think about your intimate partners, parents, children, and other important people in your life as teachers. The relationships that mean a lot to you are also your most challenging relationships, in part, because they matter and, in part, because you're learning from them. So, I often begin my work with couples by noting that they're teaching each other and that part of that teaching will lead to disagreements. And, that's OK.

In this chapter, I explore five myths about some of the more disagreeable aspects of intimate relationships. First, I explore the myth that men and women are fundamentally different in how they approach intimate relationships. Perhaps no myth in this book is so pervasive and dysfunctional. By telling ourselves – even in jest – that the other gender is nothing like our gender, we put them in the category of the “other.” Social scientists have long known that by emphasizing “otherness,” the differences between our group and the “other” group, we make it easier to mistreat them. Why do this, when it only serves to makes us less understanding and compassionate toward each other? This myth will also explore aspects of masculinity and femininity within relationships, including sex-role characteristics to look for in a partner.

The second myth in this chapter is that only men perpetrate violence in intimate relationships. Relationship scientists like K. Daniel O'Leary and Amy Slep (2012) have made a compelling case that we do women no favors by ignoring the role that they may be playing in perpetuating some aggressive or abusive relationships. I end this myth by discussing what we know works to prevent and treat violence in intimate relationships. Most importantly, I make three points crystal clear. To those who are perpetrators of violence: what you are doing is more likely to result in the dissolution of your relationship than the continuation of it. To those who are victims of intimate partner violence: the best way to protect yourself is to be unavailable to your pursuer. To everyone else: whether or not you're aware of it, you know someone who has been touched by intimate partner violence. To help them and others, support your local domestic violence agency.

Third, I discuss the myth that marital therapy (i.e., couples counseling) doesn't work. While

there's room for improvement, on average marital therapy can help improve relationship functioning when it's done by a competent and well-trained therapist. I also discuss some caveats and other considerations when contemplating couples counseling.

Finally, in the fourth and fifth myths of the chapter, I discuss the dissolution of relationships. In the fourth myth, I address whether the "first cut is the deepest." Borrowing a line from Cat Stevens' famous song, I examine whether the first heartbreak we experience leaves an indelible mark that stains the rest of our relationships. In the fifth myth, I write about divorce and the idea that getting a divorce makes people happier.

Myth #21 Men are from Mars, women are from Venus

A man finds a lantern on a beach. While brushing it off a genie pops out and grants him three wishes. After the first two wishes have been granted, the man says that he always wanted to visit Hawaii, but he's afraid to travel by plane or boat.

So, he says, "I want you to build a bridge from Los Angeles to Honolulu." The Genie replies: "That's absurd! The engineering for such a bridge is completely impossible. The ocean is too deep to sink supports. For any kind of bridge like this you'd have to consider the weather and the strong ocean currents. Plus, it would have to be high enough for ships to pass under it. It's impossible. I simply can't do it. Come up with something else."

"OK." And, after thinking it over, the man asks "Can you explain women to me?"

The genie pauses for a moment, and asks "So, do you want this bridge to have two lanes or four lanes?"

Or, how about this one:

Q:

What's the difference between men and government bonds?

A:

Bonds mature.

Jokes like these remind us that the gender wars are alive and well. But, are men and women really that different? A lot of people certainly seem to think so, including comedians like Jodi Miller who says men are like cats because they're aloof and emotionally unavailable and women are like dogs because they need to be groomed and like shoes (J. Miller, 2013). In addition to spawning thousands of jokes, the belief that men and women are fundamentally different has led to self-help books with titles such as *Men Are from Mars, Women Are from Venus* (Gray, 1992); *He Says, She Says: Closing the Communications Gap Between the Sexes* (Glass, 1992); or *You Just Don't Understand: Women and Men in Conversation* (Tannen, 1990). Then, there's the genius of Steve Harvey, a comedian who wrote a relationship book titled *Act Like a Lady, Think Like a Man* (2009). His book spent two years on the best seller

list, including 23 weeks as the #1 advice book (Reddicliffe, 2010), and was made into a movie that was #1 on its opening weekend. So, it would seem that emphasizing the differences between men and women resonates with, well, men and women.

Whether women and men are really that different can be scientifically described by two basic hypotheses: the gender differences hypothesis and the gender similarities hypothesis. As you might expect, this debate is not new and certainly not new to psychology. As far back as 1914, eminent psychologists, such as E. L. Thorndike, were debating whether the differences between the genders were as strong as people had assumed. In fact, as Hyde (2005) pointed out, one of Thorndike's contemporaries wrote the following about declarations of psychological differences between men and women: "the truest thing to be said at present is that scientific evidence plays very little part in producing convictions" (Woolley, 1914, p. 372). The sad truth is that Helen Thompson Woolley could have written those words today (over 100 years later!) and they would be no less true. Taking our cue from Woolley, let's look at the data on gender differences.

On measuring differences between populations or groups

It's best to begin with what we mean by differences between two groups or populations. This necessitates explaining a couple of statistical principles. Wait, don't skip ahead! The statistical concepts are simple (I promise) but essential for understanding claims of gender differences.

At the most basic level, two groups can be said to differ on a variable of interest if the scores on the variable are more different between the groups than they are within the groups. In other words, is the between-group variability greater than the within-group variability? This can be tested with a simple ratio of between-group differences over within-group differences, which is essentially the definition of a *t*-test. Once the value of this ratio is determined (for example, once the *t*-test has been calculated), the probability that the two groups are different based on random chance is determined. Part of scientific dogma is that two groups aren't considered to be statistically different unless the likelihood of the difference being due to random chance is less than 5% (i.e., $p < .05$). If it's not (i.e., if $p \geq .05$), no claim of a group difference can be made.

The catch is that test statistics (e.g., *t*-tests) and *p*-values don't indicate the magnitude of the difference between two groups. Both test statistics and *p*-values will vary depending on the number of participants in a study. The greater the number of subjects in a study, the more likely it is that even small differences will not be due to chance (meaning the *p*-value will shrink). This creates situations in which very large studies can lead to very small differences between groups being considered statistically significant, even if the difference between the groups is essentially meaningless. This is why most academic journals in psychology require indications of the size (i.e., magnitude) of the effects being studied. To measure the magnitude of group differences (and other types of research questions), scientists use a measure of *effect size*. There are many different types of effect sizes, but the most common type for measuring the differences between groups is called a *d*-statistic, effect-size *d*, or simply *d* (J. Cohen, 1988). One of the advantages of reporting effect-size statistics, like *d*, is that they are standardized.

This allows comparisons of effects across studies. Just as Fahrenheit is a scale that indicates temperature across settings, d is an indication of the magnitude of group differences across studies and variables.

The advantage of using d over other measures of effect size is that it's simple and specifically designed for measuring the magnitude of group differences, like the difference between men and women. The formula for d when measuring gender differences is as follows:

$$d = \frac{\text{Mean score of men} - \text{mean score of women}}{\text{Mean of the two within-sex standard deviations}}$$

Using this formula, you can see that positive d -values will mean men scored higher and negative d -values will mean women scored higher, which is the convention among those who study gender differences. What may be less obvious, but is one of the best features of d , is that it allows differences to be measured in terms of standard deviations (SD s, which are a measure of how much the scores on a variable differ from the mean). So, a d of 0.21 would mean that the two means are 0.21 standard deviations apart. To visualize this, look at [Figure 11](#). Notice that the amount of overlap of the distributions of males and females is a measure of their similarity and the degree to which the distributions don't overlap is an indication of their differences (in the case of [Figure 11](#), this is a measure of self-esteem). So, in looking at [Figure 11](#), would you describe this as a small, medium, or large effect? If you thought "small," you think like Jacob Cohen (1988) who developed qualitative descriptors for effect-size d . He described effects sizes as follows: $d = 0.20$ as "small," $d = 0.50$ as "medium," and $d = 0.80$ as "large." Janet Shibley Hyde (2005) converted Cohen's descriptions into ranges and categorized 124 studies of gender differences and found that 78% of them were either trivial or small (see [Figure 12](#)).

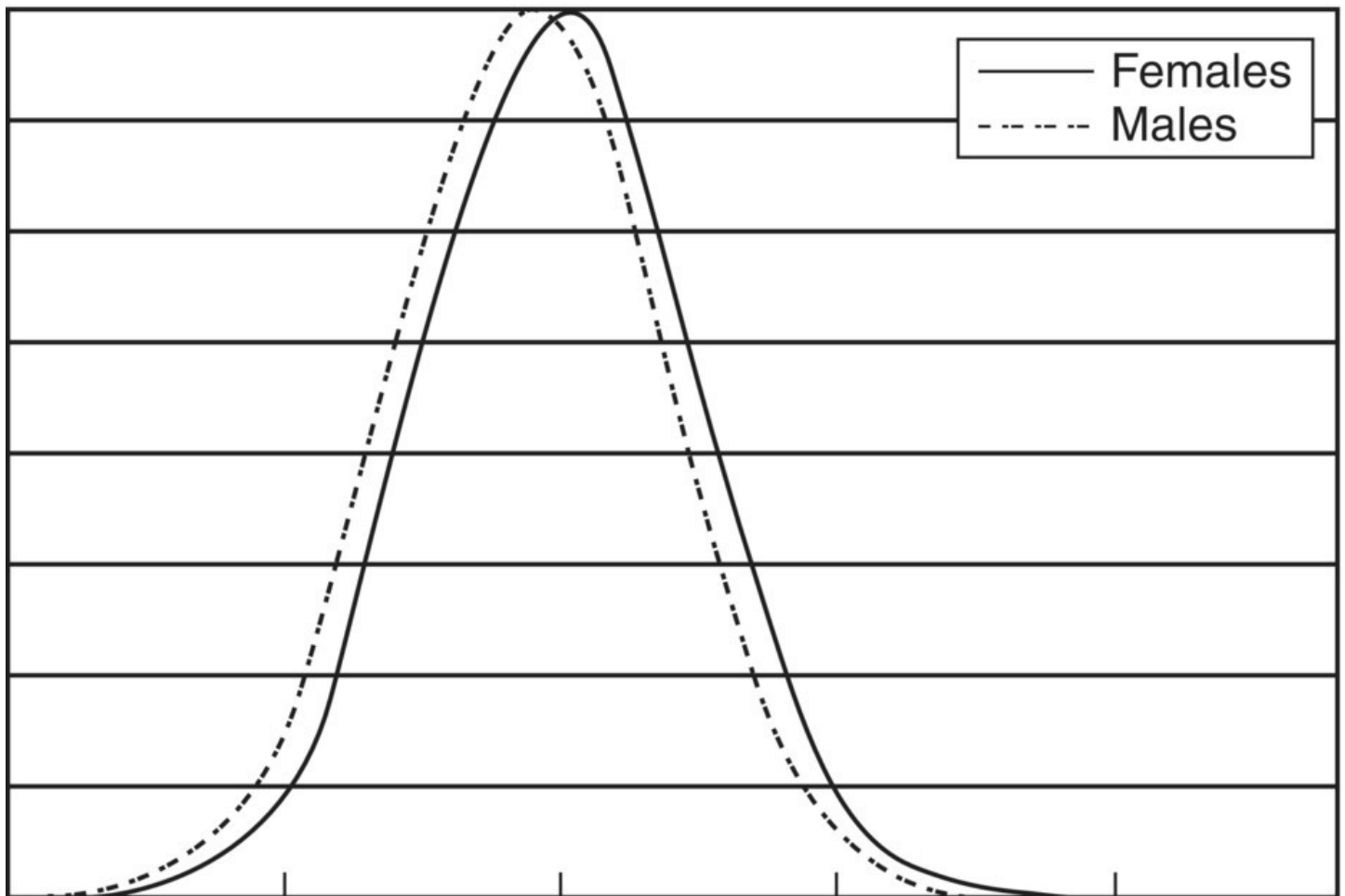


Figure 11 Do these two groups look very different? These are the normal distributions of males and females that approximate an effect size d of 0.21, which is considered a small effect. In Hyde's (2005) meta-analysis, 48% of the reported gender differences were considered small (d between 0.11 and 0.35) and another 30% considered trivial (d between 0 and 0.10), so the two distributions in this figure are typical of 78% of studies of gender differences. The above figure was originally from "Gender differences in self-esteem: A meta-analysis" by K. C. Kling, J. S. Hyde, C. J. Showers, & B. N. Buswell (1999, *Psychological Bulletin*, 125, p. 484) and reproduced in J. S. Hyde's (2005) article titled "The Gender similarities hypothesis" (*American Psychologist*, 60, p. 587).

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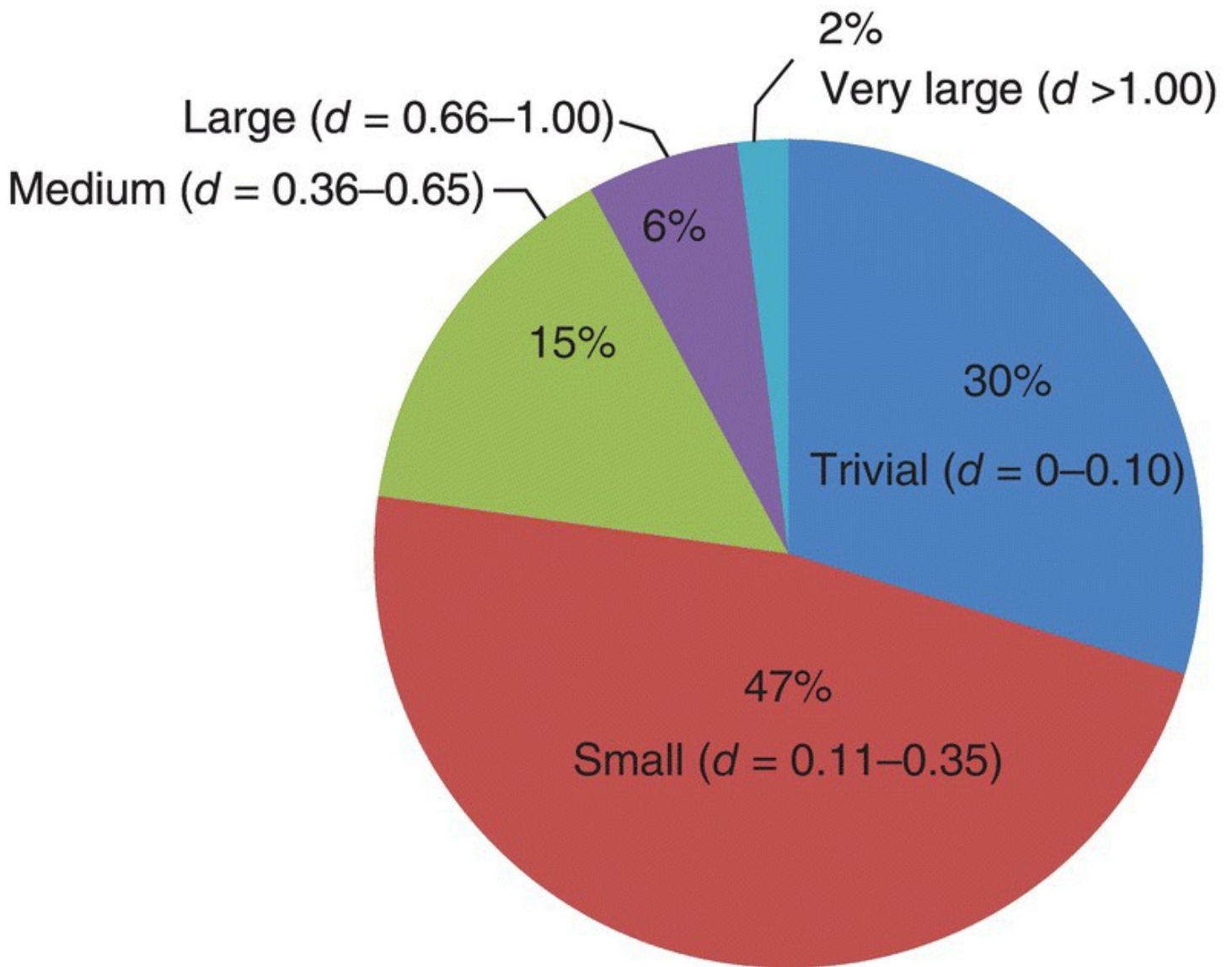


Figure 12 Of 124 studies of gender differences, these are the percentages of those with effect sizes (d) that fell into the trivial, small, medium, large, and very large categories.

(adapted from Hyde, 2005, p. 586)

Gender differences and similarities

So, are men and women really so different that they may as well be from different planets? Or, are the genders really more similar than different? To answer these questions, I'll begin with the two gender differences in the "very large" category of [Figure 12](#), which are differences in throwing velocity ($d = 2.18$) and throwing distance ($d = 1.98$; Thomas & French, 1985). That men and women are about two standard deviations apart on throwing abilities is not especially surprising based on well-known differences in the average physicality of men and women. Nevertheless, when we start to think about other well-known differences between men and women – differences that are commonly accepted stereotypes – we begin to see a different picture. [Figure 13](#) describes the magnitude of gender differences across a broad range of variables on which men and women are assumed to be different. Note that I have included the effect size of throwing velocity to give perspective on the size of the gender difference on the

other variables. Each of these variables could be examined further to consider other factors, such as whether they vary by race (e.g., the self-esteem difference of $d = 0.21$ is based on mostly White samples and switches to $d = -0.03$ for Black samples; Kling, Hyde, Showers, & Buswell, 1999) or how the data were collected (e.g., gender differences in the reporting of sexual experiences disappear when participants think they're connected to a lie detector; Alexander & Fisher, 2003; Fisher, 2013; see also Myth 1). Overall, the effects described in [Figure 13](#) contradict many stubborn stereotypes. For example, there are trivial or small gender differences for math performance, verbal skills, gregariousness, conscientiousness, neuroticism, relational aggression, tentative speech, attitudes about extramarital sex, attitudes about masturbation, leadership ability, and self-esteem (Hyde, 2014). Even in domains surrounding communication within couples, the differences are small. So it seems that men and women aren't so different.

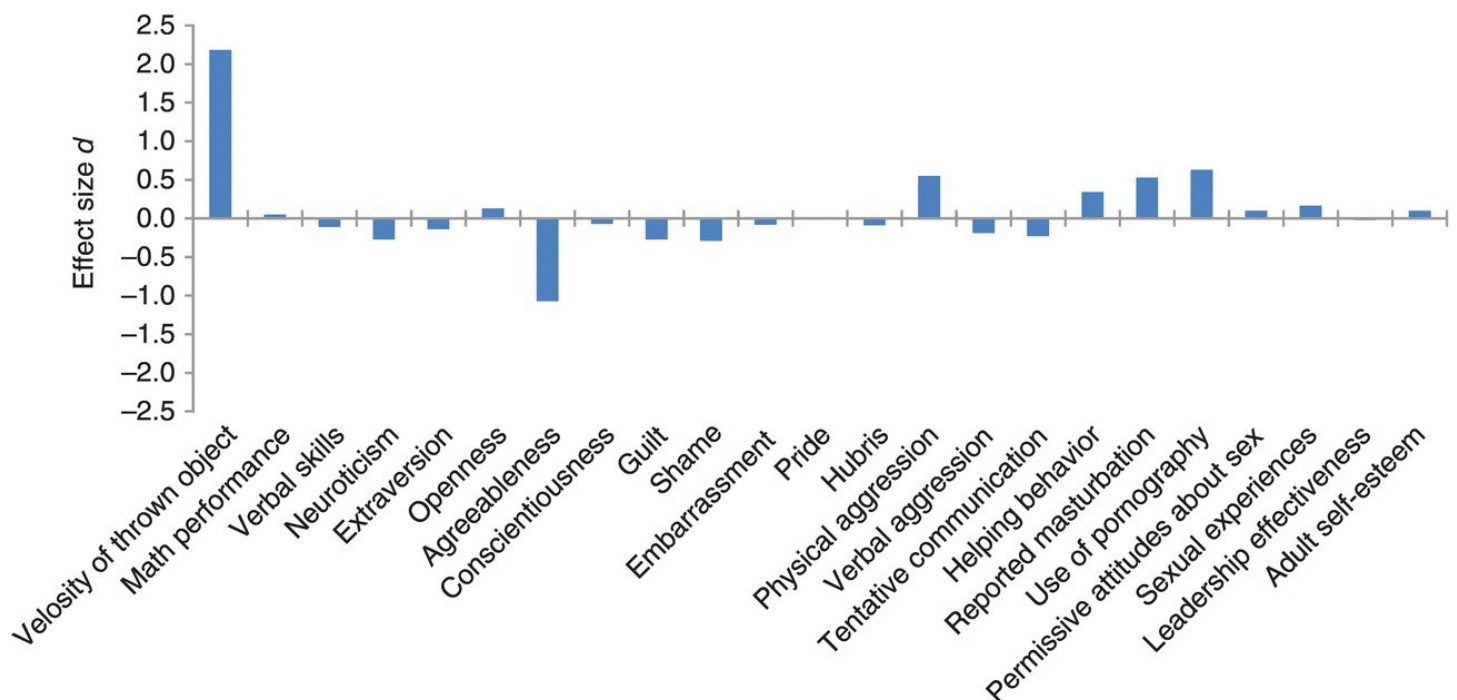


Figure 13 Meta-analytic findings regarding the differences between males and females on a variety of attitudes, behaviors, and skills. The effects are measured using effect size d , with positive scores reflecting higher scores for male than females and negative scores indicating higher scores for females compared to males. When interpreting the figure, note that $ds \approx 0.20$ are considered weak or small, $ds \approx 0.50$ are considered moderate or medium, $ds \approx 0.80$ are considered strong or large (J. Cohen, 1988); as such the majority of the psychological constructs in the figure have either null or weak gender differences.

(adapted from the following meta-analyses: Archer, 2004; Eagly, 2009; Eagly & Crowley, 1986; Eagly, Karau, & Makhijani, 1995; Else-Quest, Higgins, Allison, & Morton, 2012; Feingold, 1994; Hedges & Nowell, 1995; Hyde, 2014; Hyde, Lindberg, Linn, Ellis, & Williams, 2008; Hyde & Linn, 1988; Leaper & Robnett, 2011; Lindberg, Hyde, Petersen, & Linn, 2010; Petersen & Hyde, 2010; Thomas & French, 1985).

There are other ways of thinking about gender in relationships beyond simply looking at the differences and similarities in the mean scores of variables of interest. Another way to determine whether men and women are so different that each should consider the other gender

extraterrestrial beings capitalizes on advanced statistical methods (e.g., taxometric analysis). Bobbi Carothers and Harry Reis (2013) looked at 122 variables from 13 studies using a total of 13,301 participants. They started by seeing if they could actually put men and women on different metaphorical planets using the most obvious of variables, such as physical strength, certain leisure activities (e.g., hunting vs. knitting), and body measurements. On variables like these, they found that, sure enough, men are from Mars and women are from Venus. Knowing they could find inter-planetary differences, they examined personality variables, such as neuroticism, agreeableness, inclinations toward science, and fear of success. They also examined variables more associated with intimate relationships, such as masculinity, femininity, sexuality variables, mate preferences, empathy, and relationship dependence. No matter how they combined these variables, they kept finding that men and women are more similar than different. In other words, it appears that men and women are both *intra-terrestrial*.

The role of masculinity and femininity

If men and women are more similar than different, why do we have a sense that they are different? Partly, as discussed in Myth 6 (Opposites attract), we tend to focus on differences not on similarities. However, another way of thinking about gender is in terms of *sex role identity*, which is the degree to which individuals exhibit masculine and feminine traits regardless of the person's sex. So (according to Sandra Bem's Sex Role Inventory, 1974, 1981) masculine traits would include self-reliant, competitive, and analytical, whereas feminine traits would include empathic, gentle, and loyal (for comparison, examples of gender-neutral traits include happy, helpful, and likable). It's then possible to categorize people as high or low on masculinity and femininity. People high on masculinity and low on femininity are considered "masculine;" people high on femininity and low on masculinity are considered "feminine;" people low on both are considered "undifferentiated;" and people high on both are considered "androgynous." So, which is best for relationships?

Men and women characterized as androgynous (displaying high levels of both masculine and feminine traits) are the clear winners. They have higher self-esteem (Flaherty & Dusek, 1980), lower anxiety (Williams & D'Alessandro, 1994), better social skills (Guastello & Guastello, 2003), and better psychological adjustment (Cheng, 2005; Kring & Gordon, 1998). The benefits of androgyny are apparent in intimate relationships as well. Androgynous individuals are the most secure in their attachment to their partners (Shaver, Papalia, Clark, & Koski, 1996) and are the least likely to need relationship counseling (Peterson, Baucom, Elliott, & Farr, 1989). For all of these reasons, it's not surprising to learn that androgynous individuals are the most sought-after mates (Green & Kenrick, 1994). For a review of this literature, see Bradbury and Karney (2014). So, there's little risk and the potential for a lot of reward in being androgynous. Therefore, if you're searching for a partner, be sure to check out people like male nurses or female mechanics.

Conclusion

In summary, there's far more evidence supporting the "gender similarity hypothesis" than the "gender difference hypothesis" (Hyde, 2005, 2014). Additionally, individuals who possess

both masculine and feminine traits make excellent relationship partners. So, let's all agree that men are from Earth and women are from Earth.

Myth #22 Only men perpetrate violence in intimate relationships

"Can you get someone over here now? ... He's back. Please. He's O.J. Simpson. I think you know his record. ... He showed up again. Could you just send somebody over here? He's in a white Bronco. But first of all, he broke the back door down to get in. ... He's fucking going nuts. ... He's going to beat the shit out of me!" This quote was from a 911 call made by Nicole Brown Simpson on October 25, 1993, eight months before she was murdered. The reporters for *The Los Angeles Times* who first reported on this phone call go on to note that

authorities took no action after the October, 1993, emergency call because Nicole [Brown] Simpson declined to press charges. However, during the same month, she contacted the unit of the city attorney's office that prosecuted her 1989 battery case against Simpson, saying she was terrified and in fear for her life. According to authorities familiar with that contact, Nicole [Brown] Simpson said there were "many, many incidents" in which Simpson had threatened her.

(Meyer & Ford, 1994, p. 1)

The murders of Nicole Brown Simpson and Ronald Lyle Goldman have much to teach us about how a pattern of abuse within an intimate relationship can escalate to the point of homicide. The lessons of the case include the fact that interpersonal violence can occur even among the wealthy and respected. In the 911, call she goes on to describe the fact that she's trying to get Simpson to leave because she was with her two young children, so we learn that the presence of children doesn't prevent violence. Finally, we learn that we need to take the pleas of help from victims of domestic violence seriously when they request assistance. But, how universal is this case? In other words, do the lessons learned in this case apply to less severe cases of assault?

For a long time, it was assumed that aggression within intimate relationships fell along a continuum from minor to major acts of aggression. In fact, one of the most widely used measures of assessing violence in relationships, the Conflict Tactics Scale (Straus, 1979), begins with questions about negotiating with a partner and ends with questions about using a firearm against a partner. Nevertheless, as studies of interpersonal violence accumulated, a rift in the field became obvious. The studies were producing two distinct sets of results that appeared to contradict each other. Some studies were finding that men were almost always the ones perpetrating violence in other-sex intimate relationships. Other studies were finding that the perpetrators of violence were about equally split between men and women or, more perplexing still, were more often women! As you might imagine, the debate between these two camps was intense because of the – literally – life-and-death nature of the debate.

The debate was resolved when the differences in sampling strategies were found to be the

reason for the different findings. Social scientists who were using large national samples (e.g., Slep & O’Leary, 2005; Straus & Gelles, 1986) were painting a very different picture of domestic violence than those who were reporting data from distressed couples. The differences were stark. For example, the prevalence rates differed when comparing nationally representative samples (10–12% reporting being a victim of intimate partner assault in the last year) to samples derived from marital therapy clinics (36–58% reporting being a victim of intimate partner assault in the last year; Jose & O’Leary, 2009). In addition to studies with nationally representative samples and samples derived from marital therapy clinics, advocates of battered women presented data from domestic violence shelters, emergency rooms, police reports, and national crime surveys that suggested that there was almost no female-to-male aggression resulting in serious harm. These studies were considered important from an advocacy perspective, but caused further confusion about the rates of domestic violence. Beyond methodologies, researchers began asking whether there are other differences in the types of violence couples experience (e.g., Dobash & Dobash, 1992; M. P. Johnson, 1995).

Two types of intimate partner violence

There’s now a consensus among relationship scientists that there are two distinct types of intimate partner violence. The existence of these two types partially explains why there were such differences between the data collected in national samples and clinic samples compared to the daily experiences of people working in emergency rooms and domestic violence shelters. These two types of violence have been termed situational couple violence and intimate terrorism (Bell & Naugle, 2008; M. P. Johnson, 2008).

Situational couple violence

By far, the most common type of intimate partner violence is situational couple violence. This type of violence occurs when arguments escalate, becoming more and more intense. Then, at some point the anger boils over resulting in an assault. Don’t be fooled by the name or the fact that it’s the most common type of violence. The assaults can be severe and deadly. Punching, kicking, and threatening with (or using) a knife or firearm have all occurred during situational couple violence. Often arguments are spurred on by alcohol or other drugs, which also have a disinhibitory effect, rendering the partners more impulsive than they would be normally (for a review of the effects of alcohol on violence within couples, see Foran & O’Leary, 2008). More often than not, however, situational couple violence results in less severe violence, such as throwing objects, slapping, pushing, and grabbing. **In this type of interpersonal violence, women are as likely or more likely than men to perpetrate an assault on an intimate partner (Jose & O’Leary, 2009).**

Intimate terrorism

Whereas situational couple violence is characterized as reactive and angry, intimate terrorism is calculated and cold. This latter type of violence is about controlling a partner. Instead of being reactive, it’s proactive in the sense that the perpetrator uses violence as a means of controlling the behavior of a current or former partner. Therefore, from the perspective of the

victim or other observers, it often seems that the violence is spontaneous and hard to predict. In the transcript from the 911 call made by Nicole Brown Simpson quoted at the beginning of this myth, she describes O.J. Simpson as breaking into her house while her children are asleep. Who can say what was going through his mind, but clearly this didn't escalate from an argument. This was out-of-the-blue terrorism. Consistent with intimate terrorism, Ms. Brown Simpson was apparently fearful and felt she was in danger (Meyer & Ford, 1994). **In this type of violence, the assailants are almost always men.** In fact, this type of intimate partner violence was originally called *patriarchal terrorism* (M. P. Johnson, 1995). In the comparatively few cases in which women have killed their husbands, nearly all of them have been the result of violent resistance. **Some have argued that this is a third type of intimate partner violence, which is characterized by women using violence to protect themselves and their family members (M. P. Johnson, 2008). These cases are infrequent, but are one of the more common reasons women are incarcerated (Swan & Snow, 2002).**

Interventions for domestic violence

The shockingly high prevalence rates of intimate partner violence suggest the need for stringent screening in multiple settings, including in primary care offices (Nelson, Bougatsos, & Blazina, 2012). But, do we know what works once violence has been reported?

The criminalization of intimate partner violence didn't begin in the United States until 1871 when Alabama led the way by rescinding husbands' right to physically punish their wives (Barner & Carney, 2011). In 1914 the Psychiatric Institute of the Municipal Court of Chicago added psychological treatment for offenders to their jail time and included social services for victims (Dobash & Dobash, 1992). This change led to the two-prong approach to the treatment of intimate partner violence using law enforcement and psychosocial interventions. Let's review the data on both types of interventions.

Following some highly publicized cases of intimate partner violence, there was a strong push for the police to make more arrests. There's a substantial literature on the factors that lead police to make arrests and the outcomes of those arrests. For example, arrests are more likely to be made if the victim is cooperative, injured, White, and suburban (it also helps if it's not within an hour of the end of a police shift; e.g., Robinson & Chandek, 2000). However, the question is, does arresting the offender prevent further violence? Unfortunately, the answer is: sometimes. Arresting a man for assaulting his partner reduces the likelihood of further assaults if he is employed, but appears to increase it if he is unemployed (see [Figure 14](#); Pate & Hamilton, 1992). Evidence from a randomized outcome trial indicates that arresting the assailant increased the victim's chance of having died from homicide 23 years after the incident (Sherman & Harris, 2013). Thus, it seems unclear whether arresting an assailant – even when the victim wants him arrested – is helpful. Many have argued that averting the immediate danger is still worth it, noting that arresting the assailant has positive implications for prevention at a societal level and can provide a window for the abused partner to seek safety (for review of the impact of arresting versus warning, see Holtzworth-Munroe, Beatty, & Anglin, 1995). In any case, the nuances of the decision of whether to arrest or warn highlights the difficulty faced by police officers asked to make these decisions on a nightly

basis.

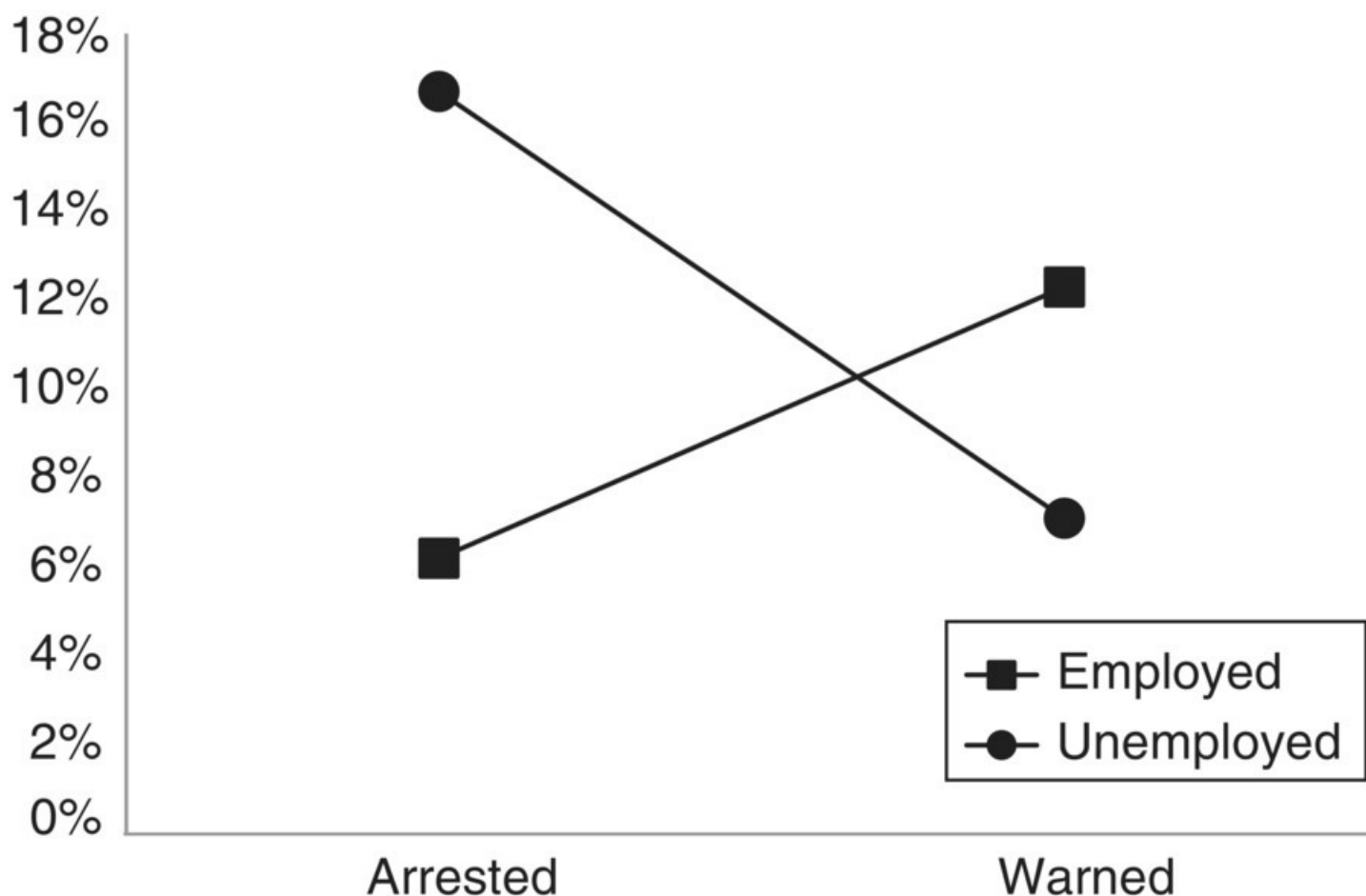


Figure 14 Percent of men who subsequently assaulted their female partners after an initial assault, separated by employment status and whether they were arrested for the primary assault.

(adapted from Pate & Hamilton, 1992, p. 695).

In addition to arresting the perpetrators of violence, another common legal intervention is for victims to seek orders of protection. While these do an excellent job of creating a legal trail that empowers the legal system to act more firmly in protecting women and children from assailants, there's controversy about whether they actually help prevent violence. As Gavin de Becker (1997) has written, restraining orders are often used by police and prosecutors as a way to gauge how serious a woman is in resolving the matter. They also can demonstrate to the abuser or stalker that the woman (the odds are it's a woman) is serious about ending the relationship. For many stalkers, this is convincing evidence that the relationship is over and that it's time to move on. However, de Becker and domestic violence advocates want to make it clear that a restraining order doesn't actually restrain anyone. So, what should women in this situation do? They should make themselves unavailable to the person who is pursuing them, and "battered women's shelters provide the best way to be safe" (p. 200).

If the record of legal interventions is mixed, do psychosocial interventions have a better record of preventing further abuse? For couples experiencing violence and who wish to remain

together, there's no empirically supported intervention (Dixon & Graham-Kevan, 2011). Indeed, the very idea of treating a couple for their violence is controversial. However, around 50% of couples who seek therapy report some episodes of violence, yet they rarely state that as their reason for coming to treatment. Therefore, in some cases therapists may decide that the violence is minimal enough to still treat the couple. In these cases, Amy Holtzworth-Munroe and her colleagues have developed a system that focuses on anger management and communication skills to reduce violence in the relationship (Holtzworth-Munroe, Beatty, et al., 1995; Holtzworth-Munroe, Clements, & Farris, 2005). However, she and her colleagues are quick to caution that couple therapy should be discouraged for some couples. In terms of treatment outside of the relationship, there's surprisingly little research on the effectiveness of programs for women. There's some evidence that the abuse of pregnant women (a common occurrence) can be reduced via multifaceted counseling programs (Van Parys, Verhamme, Temmerman, & Verstraelen, 2014). There's also some evidence that combining sheltering, advocacy, and counseling decreases the likelihood of a woman being abused again; however, there's little support for programs targeting men (Del Vecchio & O'Leary, 2004; Wathen & MacMillan, 2003). **In the end, it seems that violence within a relationship is difficult to prevent and treat; however, it's clear that domestic violence shelters and agencies save lives.** Therefore I urge you to support your local domestic violence shelter. To find one near you, go to <http://ovc.ncjrs.gov/findvictimservices/> or contact the National Coalition Against Domestic Violence.

The best interventions are those that prevent intimate partner violence before it occurs. There have been efforts to integrate violence prevention into some relationship education programs (e.g., Holtzworth-Munroe, Markman, et al., 1995), but the results of these interventions are mixed (see Myth 15). On the other hand, large media campaigns have had a positive impact on preventing intimate partner violence (Biglan, 1995; Dixon & Graham-Kevan, 2011). The catch is that most of these are targeted toward men, which is not surprising given the prevalence of people believing the myth that only men initiate interpersonal violence. **To truly break the cycle of violence in families, some have argued for media campaigns that target men and women. These might include messages that violence within families is not OK, no matter who is being violent.** The added benefit of such messages is that it could break the cycle of abuse within couples and across generations while simultaneously addressing the overlap of violence between partners and child maltreatment (Dixon, Browne, & Hamilton-Giachritsis, 2005; O'Leary & Slep, 2012).

Conclusion

To summarize, men and women engage in intimate partner violence at about equal rates. The problem is that men are more likely to cause serious injury or death and men are more likely to engage in intimate terrorism, which is just as bad as it sounds. Women who are in dangerous situations should get away from their pursuer and we should all support our local domestic violence shelters so women and children have a safe place to go (for an excellent review of the issues of violence within intimate relationships, see Dixon & Graham-Kevan, 2011; O'Leary & Woodin, 2009).

Myth #23 Marital therapy doesn't work

“Dr. Johnson, I’m interested in marriage counseling, and you were recommended to me by my attorney David Thrower.” This is a fairly typical beginning of a telephone call I might get from someone who is interested in couple therapy.¹ A little further into the conversation, the caller will often say something like “I’m not sure my husband will go for this. He doesn’t think marriage counseling will do any good” (such skepticism about the outcome of couple therapy is seen in a significant number of people seeking treatment; Tambling, 2012; Tambling & Johnson, 2010). At this point, I suggest that they talk it over and make a joint decision about whether to begin treatment. I do this, in part, because I want them to at least buy in to the process enough that they both show up for the first session and because they might make some progress without me. In addition, I usually offer to speak with the reluctant partner if he or she would like to call me. They seldom do, but, if the skeptical partner does call me, I indicate that I too am a skeptic. I’m a skeptic because I know the outcome data on marital therapy, and there’s good news and bad news in those data.

A brief history of marital therapy and why it’s supposed to work

In the United States, the roots of marital counseling go back to the 1920s when Abraham and Hannah Stone, who were both physicians, were interested in assisting couples through marriage counseling and family planning services. Working in New York City, they authored a popular book called *A Marriage Manual: A Practical Guide-Book to Sex and Marriage* and were staunch advocates for assisting women who either did or didn’t want to have children. They worked closely with Margaret Sanger, who went on to establish the International Planned Parenthood Federation in 1952. However, it was Paul Popenoe who, in 1939 with no formal training, opened the American Institute of Family Relations, based in Los Angeles, which became the country’s leading marriage clinic. Paul Popenoe (not to be confused with his son, David Popenoe, who helped found the National Marriage Project) is considered by many to be the “father of marriage counseling” and went on to write the “Can This Marriage Be Saved?” feature for the *Ladies’ Home Journal*. In addition, he wrote numerous marriage manuals, wrote a syndicated newspaper column, hosted a radio program, and was a judge on a television show (he also dabbled in eugenics and wrote positively about Hitler; Lepore, 2010). The greatest expansion of efforts to improve marriages came in the late 1940s and early 1950s when there was an uptick in divorces among young married couples following World War II (Prochaska & Prochaska, 1978). However, the early treatments were little more than psychoanalysis in which both members of the couple were treated individually. This form of concurrent marital therapy dominated until the early 1970s when conjoint approaches (i.e., seeing both members of the couple together) became the norm, but the field was still new and grasping for treatments that worked (for an interesting history of marital interventions, see Davis, 2010).

Everything changed in marital therapy (and in psychology more generally) with the increasing influence of behaviorism (Skinner, 1974; J. B. Watson, 1913) on psychological interventions. Social learning theory (Bandura, 1969, 1977), which suggested that people train each other through basic learning principles (rewarding and punishing behaviors), came to influence how

psychologists conducted psychotherapy. As applied to couples, social learning theory posited that partners reward and punish the other person's behaviors. This idea became the basis for the behavioral model of marriage, which suggested that dysfunction develops when maladaptive behaviors are inadvertently rewarded and adaptive behaviors are punished (Stuart, 1969; Weiss et al., 1973). The goal of behavioral marital therapy was to alter the dysfunctional learning that had taken place and implement a new set of rewards to enhance more functional behaviors (Jacobson & Margolin, 1979; Stuart, 1980). In the years since behavioral marital therapy was first introduced, the theory behind it has become mainstream. People who call me for couple therapy often describe relationship problems as communication issues (see Myth 16). For example, a husband might say "mostly, we are having a communication problem," which I might later discover means that she's no longer speaking to him since she discovered his affair. However, couples and clinicians can be forgiven for couching relationship problems in behavioral terms; after all, the simple logic of the model is appealing and the exchange of behaviors is how humans connect to each other (Kelley et al., 1983). For more about how interpersonal behaviors predict success or failure in relationships, see Myths 16, 17, and 20.

Measuring treatment outcomes

Psychologists often refer to two types of therapy outcomes: *efficacy* – which answers the question of whether the patients who received the intervention demonstrated a statistically significant improvement compared with those in the control condition; and *effectiveness* – which answers the question of whether the patients who received the intervention demonstrated a clinically significant improvement compared to those in the control condition.

Statistical significance is determined by examining whether the p -value is less than .05 meaning there's less than a .05 probability that the treatment effect is due to chance (i.e., $p < .05$). As you may remember from your statistics class (or from Myth 21), there are two things that determine the p -value: the size of the treatment effect (in the case of outcome research, this is the size of the difference between the control group mean and the intervention group mean on whichever variable is considered the outcome variable) and the size of the sample (i.e., the N).

Demonstrating effectiveness, sometimes called “clinical efficacy,” is usually more difficult than demonstrating efficacy because the presence of a statistical difference in a variable doesn't mean that there's a clinical difference. To better understand this, imagine that, instead of relationship satisfaction, the outcome is salary. If we compared two groups with a large enough sample size, we might find that one group had an average salary that was statistically higher than the other group. However, the difference might end up being \$120 (average of control group = \$57,892; average of intervention group = \$58,012). You would then need to make a judgment call on whether that is clinically significant. To do so, you might break that down into smaller units (e.g., \$10 a month) or put it in terms other than money (e.g., three tanks of gas). Either way, you might decide that while your intervention (whatever it was) was statistically significant – and therefore *efficacious* – it was not clinically significant – and therefore it wasn't *effective*.² For a more detailed discussion of efficacy and effectiveness, see a report written by a select committee of the Society for Prevention Research (Flay et al., 2005).

Does marital therapy work and, if so, which approach works best?

Since it first starting being used, there's been considerable research on the efficacy and effectiveness (see the inset) of behavioral marital therapy. In terms of efficacy, the intervention appears to have helped some couples by improving relationship satisfaction. A meta-analysis of behavioral marital therapy outcome studies described it as moderately more efficacious ($d = .59$) than no treatment control groups (Shadish & Baldwin, 2005). Nevertheless, if we switch to considering effectiveness, the data are less encouraging. In one study, clinical significance was defined as the couples improving to the point that they were no longer different from couples who were not seeking or receiving couple therapy (a tough criterion to meet). Using

this effectiveness criterion, behavioral marital therapy was effective for slightly fewer than half of couples (Jacobson et al., 1984).

Another aspect of outcome research to consider is whether the benefits continue following the end of the treatment. Of the slightly fewer than half of couples for whom behavioral marital therapy was effective, about 70% of them maintained their relationship satisfaction at that level or better for two years (Jacobson, Schmalings, & Holtzworth-Munroe, 1987). In another study, of those couples who were rated as being satisfied with their relationship at the end of behavioral marital therapy, 15% dissolved their relationship within two years (Christensen, Atkins, Yi, George, & Baucom, 2006) and 30% dissolved their relationship within five years (Christensen, Atkins, Baucom, & Yi, 2010). Therefore, it appears that behavioral marital therapy is likely to lead to clinically significant improvements in relationship satisfaction in about half the couples at the end of treatment and, of those couples who were satisfied, about 70% will continue to be satisfied for two to five years.

When comparing different types of couple therapy, the outcomes are similar. For example, there are similar benefits when couples are treated with behavioral therapy versus insight-oriented therapy, which is a theoretical sibling to psychodynamic psychotherapy (Jacobson, 1991; Snyder & Wills, 1989; Snyder, Wills, & Grady-Fletcher, 1991a, 1991b). A comparison of behavioral therapy with a revised version of behavioral therapy, which included acceptance, revealed that the percent of couples who recovered or who reported substantial gains in marital satisfaction was similar for both groups, as was the percent who deteriorated and divorced (Christensen et al., 2010). Other analyses have found similar rates of effectiveness across other approaches to couple therapy (e.g., S. M. Johnson & Wittenborn, 2012; see also Lebow, Chambers, Christensen, & Johnson, 2012). Therefore, it seems that there's little difference between the models of couple therapy, so the key is to find a competent counselor who knows how to work with couples (Christensen et al., 2004).

Conclusion

In the end, the similarity of the outcome findings when comparing various psychological treatments for relationship distress doesn't change the fact that marital therapy, when it's conducted competently, has about a 50% chance of immediately improving intimate relationships to the point that the relationship satisfaction of couples seeking treatment is indistinguishable from couples who aren't seeking treatment. While relationship scientists and couple counselors would like to improve that number, knowing it allows me to have an informed conversation with those considering marital therapy. Therefore, when I speak with a person who is (or has a partner who is) reluctant to come to couple therapy because of doubts about its effectiveness (as in the example at the start of this myth), I can say: "On average, 50% of couples who participate in marital therapy experience clinically significant improvement and most maintain that improvement over the long term even if they had severe relationship problems."

Myth #24 The first cut is the deepest

When using a metaphor, it's best to make sure that we're in agreement as to what is meant by the metaphor. So, perhaps the best place to start is with the lyrics of the song that Cat Stevens (now known as Yusuf Islam) wrote. Here are the opening lines of the song:

I would have given you all of my heart
but there's someone who's torn it apart
and she's taking almost all that I've got
but if you want, I'll try to love again
baby I'll try to love again but I know

The first cut is the deepest, baby I know
The first cut is the deepest
'cause when it comes to being lucky she's cursed
when it comes to lovin' me she's worst
but when it comes to being loved she's first
that's how I know

The first cut is the deepest, baby I know
The first cut is the deepest

Clearly, this song has resonance with a lot of people because it has been a hit song four times, by P. P. Arnold (in 1967), Keith Hampshire (1973), Rod Stewart (1977) and Sheryl Crow (2003), and it won an award from the American Society of Composers, Authors and Publishers. The song goes on to request that his new lover help him dry his eyes from his feelings for his first lover (a request that seems unwise). Nevertheless, the main message of the song was powerful enough that "the first cut is the deepest" has become a widely used expression.

Researching the validity of an expression or a metaphor from a song is probably a fool's errand because it could be interpreted in multiple ways. So, let's start with some assumptions. The idea seems to be that the singer's capacity for future relationships has been severely damaged by the singer's first love. With some coaxing, the singer may be willing to fall in love again, but the new partner will need to understand that the former partner will be considered "first" and, oddly, "worst." I assume that "worst" in this case means "best," just as when Michael Jackson taught us that "bad" means, in essence, "good" (these are the kinds of issues that crop up when science examines art).

Therefore, Mr. Stevens appears to have been suggesting the following with this song: (1) the psychological damage from being in love and breaking up for the first time is severe; (2) future intimate relationships are likely to suffer because of a first love; and (3) if we take "worst"

and “deepest” at face value, the effects of a first breakup are the most damaging in one’s life. Therefore, we get three myths for the price of one. However, we still need to define (scientists would say *operationalize*) a few things. First, what do we mean by first love? As a relationship scientist, I try to avoid the word “love” because defining it seems either too generic (e.g., intense liking) or too technical (e.g., flooding the central nervous system with affiliative neurochemicals such as oxytocin); however, we seem to have no choice. So, let’s go with a definition that is fairly vague by defining “love” as having a relationship that has, minimally, the potential for sex (notice this is the same way I defined an “intimate relationship”). Now for the easier definition: “first.” Using the definition of love as a close relationship with at least the potential of sex, I am excluding relationships that occurred before puberty. We also know that most people begin having their first sexual experiences in adolescence; therefore, I will limit the discussion of the empirical literature to adolescent intimate relationships. Now let’s examine the research on whether the first cut is the deepest.

Sub-myth 1 The psychological damage from adolescent relationships and break-ups is severe

Many parents worry about the consequences of teenagers dating and even assume that dating will lead to sex and pregnancy (Guzman, Caal, Hickman, Golub, & Ramos, 2013). The belief that adolescent break-ups have long-term negative consequences has some truth to it. The top predictor of first-time depression in adolescents is the break-up of a romantic relationship, which can lead to future depressive episodes (Monroe, Rohde, Seeley, & Lewinsohn, 1999). However, as many articles and parenting books point out, the pain of a first break-up is also an important milestone in a person’s life (e.g., Caron, 2010). While there are many individual cases where adolescent relationships may lead to severe psychological damage, this is not the norm. Indeed, more than half of U.S. adolescents report having had an intimate relationship within the last 18 months (Carver, Joyner, & Udry, 2003). These numbers vary culturally and developmentally (Giordano, Manning, & Longmore, 2005; Meier & Allen, 2008; Upchurch, Levy-Storms, Sucoff, & Aneshensel, 1998) and the numbers are higher if looser definitions of intimate relationships are used (Furman & Hand, 2006). Therefore, given the facts that adolescent relationships are more common and last longer than most people estimate (W. A. Collins, Welsh, & Furman, 2009), it seems that they are developmentally appropriate. But, are they damaging?

There’s clear evidence that the psychological factors associated with adolescent relationships vary a great deal depending on the qualities of the relationship, the circumstances, and the characteristics of the adolescent (Furman & Collins, 2009; Furman & Shaffer, 2003). However, in their review of adolescent relationships, W. Andrew Collins, Deborah Welsh, and Wyndol Furman (2009) describe how these relationships are associated with developmentally important psychological factors, including “forming a personal identity, adjusting to changes in familial relationships, furthering harmonious relations with peers, succeeding (or not) in school, looking ahead to future careers, and developing sexuality (regardless of the extent of sexual activity)” (p. 644).

So, being in adolescent relationships is associated with typical and well-functioning adolescent development. What about adolescent relationships that are especially strong? By defining “strength” of a relationship as relationship quality, we can examine the correlates of relationship quality during adolescence. It turns out that relationship quality is associated with greater social competence as well as self-esteem and confidence (M. J. Pearce, Boergers, & Prinstein, 2002; Zimmer-Gembeck, Siebenbruner, & Collins, 2001).

On the other hand, bad relationships can be quite problematic. Collins and colleagues (2009) note that dysfunctional adolescent relationships are associated with higher rates of alcohol and other drug use, poor academic and job performance, and mental health problems (Zimmer-Gembeck et al., 2001; Zimmer-Gembeck, Siebenbruner, & Collins, 2004). One way in which adolescent relationships can be dysfunctional is when one member of the couple is afraid to express herself or himself out fear of being dumped. Indeed, many adolescents report stifling themselves in an effort to sustain a relationship, even in comparably strong relationships. This type of self-silencing is associated with increased rates of depression and sensitivity to rejection. As you might imagine, it’s also associated with communication problems within the relationship (Harper, Dickson, & Welsh, 2006; Harper & Welsh, 2007).

In summary, to the extent that someone describing his or her “first cut” or “first love” means they are talking about a reasonably functional relationship, there’s evidence that these can have a positive impact on adolescent development. In fact, there’s some evidence that first sexual experiences, whether kissing or intercourse, relieve some anxiety and often result in improved emotional states (L. M. Langer, Zimmerman, & Katz, 1995; Regan, Shen, De La Peña, & Gosset, 2007).

Sub-myth 2 Future intimate relationships are likely to suffer because of adolescent relationships

There’s evidence that early negative experiences with intimate relationships increase later pessimism about relationships (Carnelley & Janoff-Bulman, 1992). In addition, involvement in intimate relationships in early adolescence is associated with academic, psychological, and behavioral problems (for a review, see B. B. Brown, Feiring, & Furman, 1999).

However, rather than having a negative association on later relationship functioning as many believe, mid- and late-adolescent relationships actually appear to have a positive effect (W. A. Collins et al., 2009). For example, Ann Meier and Gina Allen (2009) found that having intimate relationships in adolescence increased the likelihood of marriage in young adults and increased the age at which they were married. However, this association varied by race. Specifically, African American adolescents in a steady relationship were less likely to marry and more likely to cohabit with a partner as adults (the opposite was found for the rest of their sample). A similar study in Germany demonstrated that the quality of adolescent relationships (specifically, partner support) is associated with early adulthood relationship quality (Seiffge-Krenke, 2003). In summary, the findings on the impact of adolescent relationships on adult relationships is strong enough to lead Meier and Allen to write that “rather than being trivial or fleeting, adolescent romantic relationships are an integral part of the social scaffolding on

which young-adult romantic relationships rest” (2009, p. 308).

It should be noted that all of the aforementioned associations are for consensual intimate relationships in mid- to late-adolescent development, without violence (Haugaard & Seri, 2003). Indeed, the romantic experiences taking place in late childhood or early adolescence are associated with future relationship problems (as well as misconduct and academic problems; Furman, Ho, & Low, 2007; Zimmer-Gembeck, Siebenbruner, & Collins, 2001). In addition, adolescents in relationships who are also engaging in casual sex and have disengaged families are more likely to have later relationship problems (Ayduk, Downey, & Kim, 2001; Davila, Steinberg, Kachadourian, Cobb, & Fincham, 2004; Grello, Welsh, Harper, & Dickson, 2003). Therefore, as with most correlational findings, there are many qualifiers and ways in which adolescent relationships could potentially have negative consequences for later relationships.

Sub-myth 3 The effects of one's first break-up are the most damaging in one's life

The first sexual experience is one that people don't forget. It has such an impact that there's a play called *My First Time* (Davenport, 2007). In the play, actors describe various “first-time” sexual experiences. Sexual firsts are such a cultural touchstone that just the phrase “my first time” usually needs no explanation. Clearly, there's a mythology about our first sexual experiences and the dissolution of the relationships behind those first sexual experiences. The question is whether the dissolution of that first romance is the most difficult that people experience.

Adolescence is a difficult time on many levels and one of those has to be the development of emotion regulation, including how adolescents learn to cope with disappointment. This partially explains why adolescence is a time of increased suicidal thoughts, with 4.1% of adolescents attempting suicide (Nock et al., 2013). Although romantic disappointments are usually only a small part of why youth attempt suicide, it is worth reaching out to adolescents who are in serious distress about a break-up. By asking someone about their suffering and whether they are considering suicide, you may prevent a tragedy (for reviews, see Andover, Morris, Wren, & Bruzzese, 2012; Gould, Fisher, Parides, Flory, & Shaffer, 1996).

For further information about suicide prevention, contact your local mental health agency or call a suicide prevention lifeline:

- In the United States and Canada: 1-800-273-TALK (8255; <http://www.suicidepreventionlifeline.org/> or <http://suicideprevention.ca/>)
- In Australia: 13 11 14 (<https://www.lifeline.org.au/>)
- In the UK: 116 123 (<http://www.nhs.uk/Conditions/Suicide/Pages/Getting-help.aspx>)

Returning to the question of whether the effects of adolescent relationship dissolution are worse than the dissolution of later intimate relationships (e.g., divorce), it's not even close.

The effects of divorce are far more profound. On nearly any measure, being divorced is worse than being married or single (the effects of being widowed come close to the effects of divorce on a few variables). To keep it simple, let's limit our discussion to one variable: life satisfaction. Divorce is one of very few common variables that can permanently alter your life satisfaction (see Myth 25). Most of the events that people experience may raise or lower their life satisfaction, but sooner or later they come back to their average level of satisfaction. Not so with divorce. It knocks you down and tends to keep you down (for a review, see Diener et al., 1999). In addition, it's universal. Ed Diener, Carol Gohm, Eunkook Suh, and Shigehiro Oishi (2000) collected a sample of 59,169 people in 42 nations and evaluated the association between marital status and life satisfaction (also called *subjective well-being*). In every culture and nation that they assessed, people who were divorced reported lower life satisfaction than people who were married. Although there were small changes in the size of the effect depending on each country's cultural tolerance of divorce, the findings were consistent across the world. So, clearly divorce is a very deep cut (for a more detailed discussion of the effects of divorce see Myth 25; see also Smock, Manning, & Gupta, 1999).

The cut of an adolescent relationship dissolving is simply not as deep as that of a marriage dissolving. In fact, adolescent relationships that don't dissolve but continue into adulthood and lead to marriage are more likely to experience marital distress and divorce (Karney & Bradbury, 1995). Given the developmental benefits of appropriate adolescent intimate relationships, it's reasonable to assume that dissolving intimate relationships is an important developmental milestone for adolescents. Whether one is the dumper or the dumpee, there's much to be learned from this type of experience and lessons for later life. Although there's little research on the termination of adolescent relationships, it's clear that families and peers play important roles in assisting with the onset, continuation, and dissolution of adolescent relationships (W. A. Collins et al., 2009). But, in the end divorce is a much deeper cut (see the next Myth).

Conclusion

In almost no way is the first cut the deepest. It probably just feels that way because – to borrow from yet another song – breaking up is hard to do, no matter what your age. If we define the “first cut” as being an adolescent intimate relationship, we know that adolescent relationships are more common and longer lasting than most people think. They're associated with both positive and negative events, depending on a number of other factors; however, appropriate and functional relationships tend to be associated with better long-term relationship functioning (for a positive reframing of adolescent sexuality, see Harden, 2014). Finally, as bad as adolescent break-ups are, they tend to be experienced as worse because the pain is a new experience and because adolescents are still developing their ability to understand their emotions, but from a perspective of overall life satisfaction the experience of divorce is far worse than that of an adolescent break-up. In the end, the first cut may feel deep, but it is more like a blister that precedes thicker skin. Perhaps there's another song in there somewhere.

Myth #25 Things will improve once you're divorced

“Life’s short. Get a divorce.” This trademarked message was on a billboard that went up in Chicago on May 1, 2007 (Pallasch, 2007). The billboard implied that divorce can lead to increases in your subjective well-being or life satisfaction (see the introduction and Myth 24 for more on this concept). Based on surveys of attitudes and expectations about divorce, it seems that many people agree with the sentiment expressed in the billboard (e.g., Diaz, Molina, MacMillan, Duran, & Swart, 2013; S. P. Martin & Parashar, 2006; Trail & Karney, 2012). So, does it work? Does getting out of an unhappy marriage improve life satisfaction? Let’s look at the data.

Bonus myth: The divorce rate is climbing

Contrary to what many think, the divorce rate is not climbing. In fact, it’s dropping in the United States. For every 1,000 people in the United States, 4.7 of them got a divorce in 1990, 4.1 did in 2000, and 3.4 did in 2009 (Kreider & Ellis, 2011). These data aren’t unusual in comparison with historical trends. The divorce rate has fluctuated quite a bit over time, going down in the 1950s and 1960s and back up in the 1970s and 1980s. In addition, these rates vary across nations and states. Regardless of the rate, divorce is associated with lower well-being. Read on as I explore these associations in both adults and children as well as what might be the explanatory mechanisms of the associations.

We know that marital status is associated with life satisfaction in cross-sectional studies (in other words, studies that compare life satisfaction across married, single, and divorced couples), with married people reporting greater life satisfaction than divorced people (Haring-Hidore, Stock, Okun, & Witter, 1985; Myers, 1999) and these correlations appear to be similar around the world (Diener et al., 2000). However, cross-sectional studies are unable to differentiate whether people who are more satisfied with their lives are less likely to divorce or whether divorce leads to lower life satisfaction. To address this question, we turn to longitudinal studies in which researchers assess people before and after their divorces (for more on longitudinal studies, see the introduction to [Chapter 5](#) “Predicting Success in Relationships”). This is exactly what Richard Lucas (2005) did. Using the German Socio-Economic Panel Study collected by the German Institute for Economic Research in Berlin, he was able to track the life satisfaction of more than 30,000 Germans over 18 years.

Before I describe the results of this study, let me give a little background on the research on life satisfaction. People are often surprised to learn that most events don’t permanently impact life satisfaction. Even though people play the lottery, work hard for a promotion, or set goals they think will make them happy, attaining these goals tends to result in only a transient increase in life satisfaction. Similarly, people fear losing their jobs, becoming disabled, or losing a friend. Yet these events, as well, tend to result in reductions in life satisfaction that are temporary. The resilience to set-backs and the existential ennui that can follow successes has

been replicated so many times (e.g., Brickman, Coates, & Janoff-Bulman, 1978; Suh, Diener, & Fujita, 1996) that scientists have come to believe that people tend to have a fairly stable level of life satisfaction to which they return following most of the events in their lives. In other words, humans work hard at increasing – or at least preventing the decrease of – our life satisfaction without ever really having an impact on it. This has led to the concept of a *hedonic treadmill* on which we're running to achieve happiness without ever quite getting to the blissful destination of our dreams (Brickman & Campbell, 1971; Headey & Wearing, 1989). Having noted how few events can permanently alter one's life satisfaction, let's return to Lucas' (2005) 18-year study of life satisfaction.

Lucas (2005) found that divorce appears to have a permanent – or at least a long-term – effect on life satisfaction. **Just to reiterate: of the many major life events humans may experience, divorce appears to be one of the very few events that can permanently alter overall life satisfaction (for a review of other events that can permanently lower life satisfaction, see Diener, Lucas, & Scollon, 2006).** [Figure 15](#) describes how individuals who divorce don't make it back to their original levels of life satisfaction. However, [Figure 15](#) doesn't address the possibility that there may be a pre-existing difference between those who go on to divorce and those who don't divorce that is present even before they get married and that the early years of their marriage might have been unusually satisfying for people who eventually divorced. Lucas looked at that as well. Indeed, there was a difference in the levels of life satisfaction before marriage, with those who would later go on to get married and divorced having lower levels of life satisfaction than those who would go on to get married and stay married. Nevertheless, this difference couldn't account for the stable drop in life satisfaction that followed a divorce. Thus, there's compelling evidence that on average divorce lowers your life satisfaction.

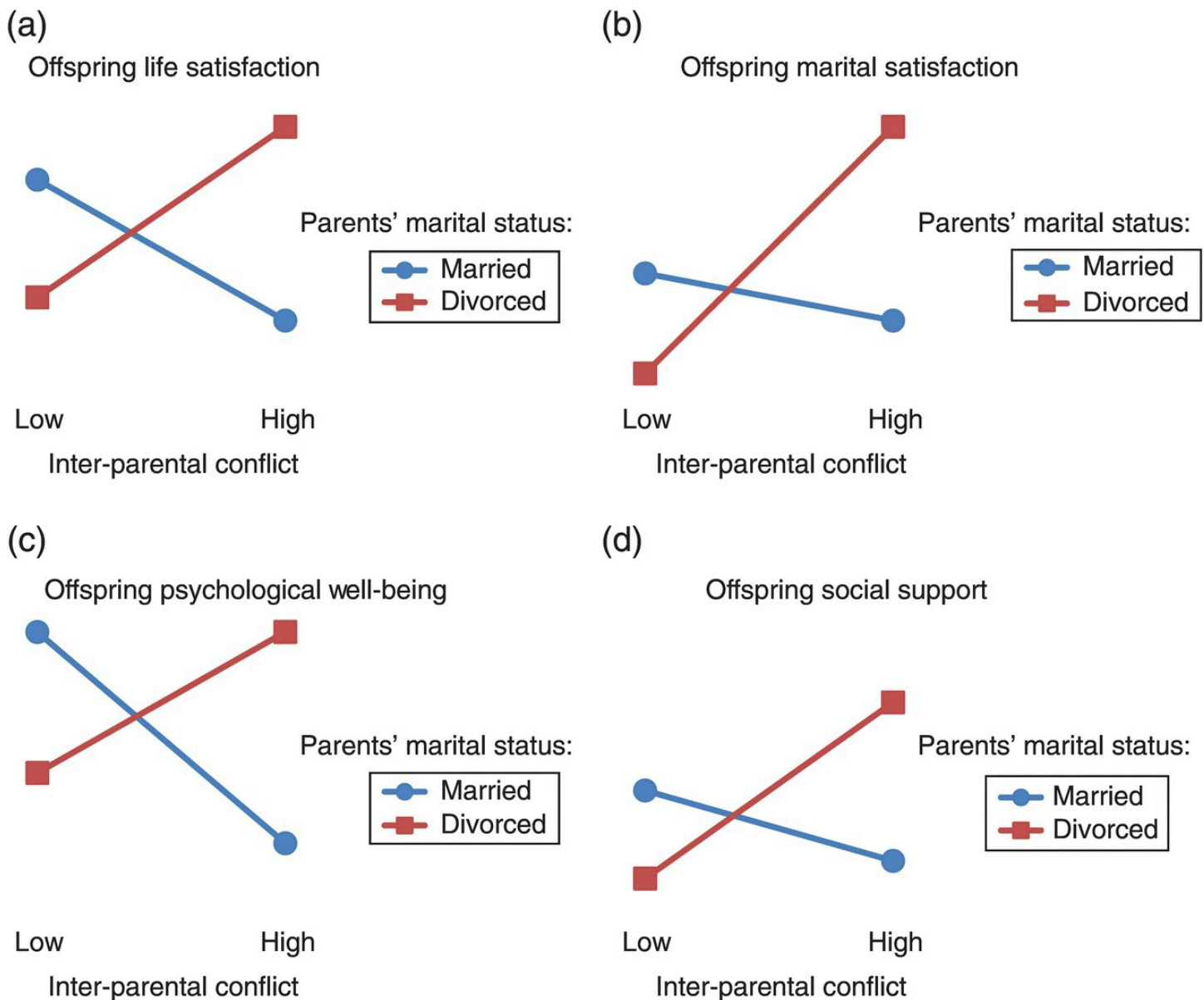


Figure 15 The graph above shows the average trajectories of life satisfaction in the years before and after divorce. Thus, in this graph, the overall mean of life satisfaction for the whole sample (regardless of whether the participants were single, married, divorced, etc.) was recalculated to equal zero (thus negative numbers represent values below the mean) and the year of the divorce is year zero. As you can see, the life satisfaction of people who experienced a divorce does not make it back up to their baseline level as it does with most other major life events.

(Figure is from Lucas, 2005, p. 947).

Despite these findings, it should be noted that there are clear individual differences in how people respond to divorce (Mancini, Bonanno, & Clark, 2011) that serve to remind us that findings like these are general and may not apply to everyone who gets divorced. For example, if your partner is violent or abusive, dissolving the relationship and making yourself unavailable to your partner will likely improve your life satisfaction and possibly prolong your life (as discussed in Myth 22; de Becker, 1997). In fact, it's clear that one of the ways to drive a romantic partner away from a relationship is by being aggressive or violent (e.g., Rogge &

Bradbury, 1999).

Children and divorce

If divorce is hard on spouses, what are the effects on children? Again, let's start with the cross-sectional data. Adults whose parents divorced when they were children tend to have more mental illness, lower marital quality, higher rates of divorce, lower educational attainment, lower income, and worse physical health (for review, see M. D. Johnson & Bradbury, 1998). The question – as with spouses – is whether we can identify the mechanism for the impact of divorce on children. Paul Amato and Bruce Keith (1991b) conducted a meta-analysis that considered 34 childhood outcomes and found that children from divorced parents did worse on 27 of them. They then considered three possible mechanisms for the apparent negative impact of divorce on children.

First, Amato and Keith (1991b) considered the fact that divorce usually means the same income has to support two households, which effectively reduces the financial resources of the family. This reduction in turn can mean a loss of opportunities for children experiencing the divorce of their parents. They tested whether the financial impact and subsequent loss of opportunities accounted for the impact of divorce on children by comparing children with divorced parents to children with married parents, while statistically controlling for income. They found partial support for this hypothesis. If the effects of income inequality are removed from the analyses, the number of child well-being outcomes showing a difference between married and divorced families dropped from 27 to 13. They also found evidence that the effects are even more substantial when the divorce causes a substantial drop in the families' socio-economic standing. Thus, there's modest support for the finding that the economic repercussions of divorce adversely impacts children.

Second, they considered whether the change in family structure was accounting for the worse child outcomes in families who had experienced a divorce. This was a tougher hypothesis to test. First, they noted that the big change in family structure that comes with divorce usually involves the father's absence from the home. So, they looked at studies that compared children in single-mother families with families that included an active step-father. In the six studies that examined this difference, they found that the presence of a step-father in the home improved the outcomes for sons and worsened the outcome for daughters. When they examined this hypothesis by simply using time spent with the non-custodial parent, they again found that greater father-son time was associated with improved outcomes, but the effect was not there for father-daughter time. This is consistent with the fact that fathers tend to be less active in parenting daughters compared to sons (Amato & Keith, 1991b). Therefore, it seems that family disruption may account for some of the deleterious effects of divorce on boys but not girls.

Third, Amato and Keith examined studies that considered whether the increase in conflict expressed in the home prior to and during divorce might account for the effects of divorce on children. This was the strongest of the three effects. There's a large empirical literature detailing the impact of family conflict on children (Amato & Keith, 1991b). In fact, this hypothesis was studied in two large studies that examined the effects of divorce on children

(one in the United States and one in Great Britain). These studies found that the effects of divorce were ameliorated when the inter-parental conflict was statistically removed from the analyses (Cherlin et al., 1991). **Therefore, it seems that parental conflict is a powerful predictor of problematic childhood outcomes.**

Given that there appear to be negative effects of parental conflict and divorce on children, the next question is whether these effects are long-lasting. Amato and Keith conducted another meta-analysis (1991a) that confirmed that the effects are long-lasting. However, even more compelling evidence came from a 12-year study that Amato conducted with Laura Spencer Loomis and Alan Booth (1995) looking at the effects of parental divorce on the children's well-being as young adults. Specifically, they assessed the adult offspring's life satisfaction, psychological well-being, marital satisfaction, and social support. Most importantly, they used both parental conflict and divorce as predictors of these outcomes. They found that the negative impact of the divorce actually decreased to the extent that there was more conflict between the parents in the marriage. In other words, it seems that divorces that curtail the conflict between the parents can benefit children in the long run; whereas, divorces in low-conflict couples appear to have a negative impact on children (see [Figure 16](#)). Thus, it appears that the long-term benefits or detriments of divorce on children depend on the amount of conflict within the parents' marriage.

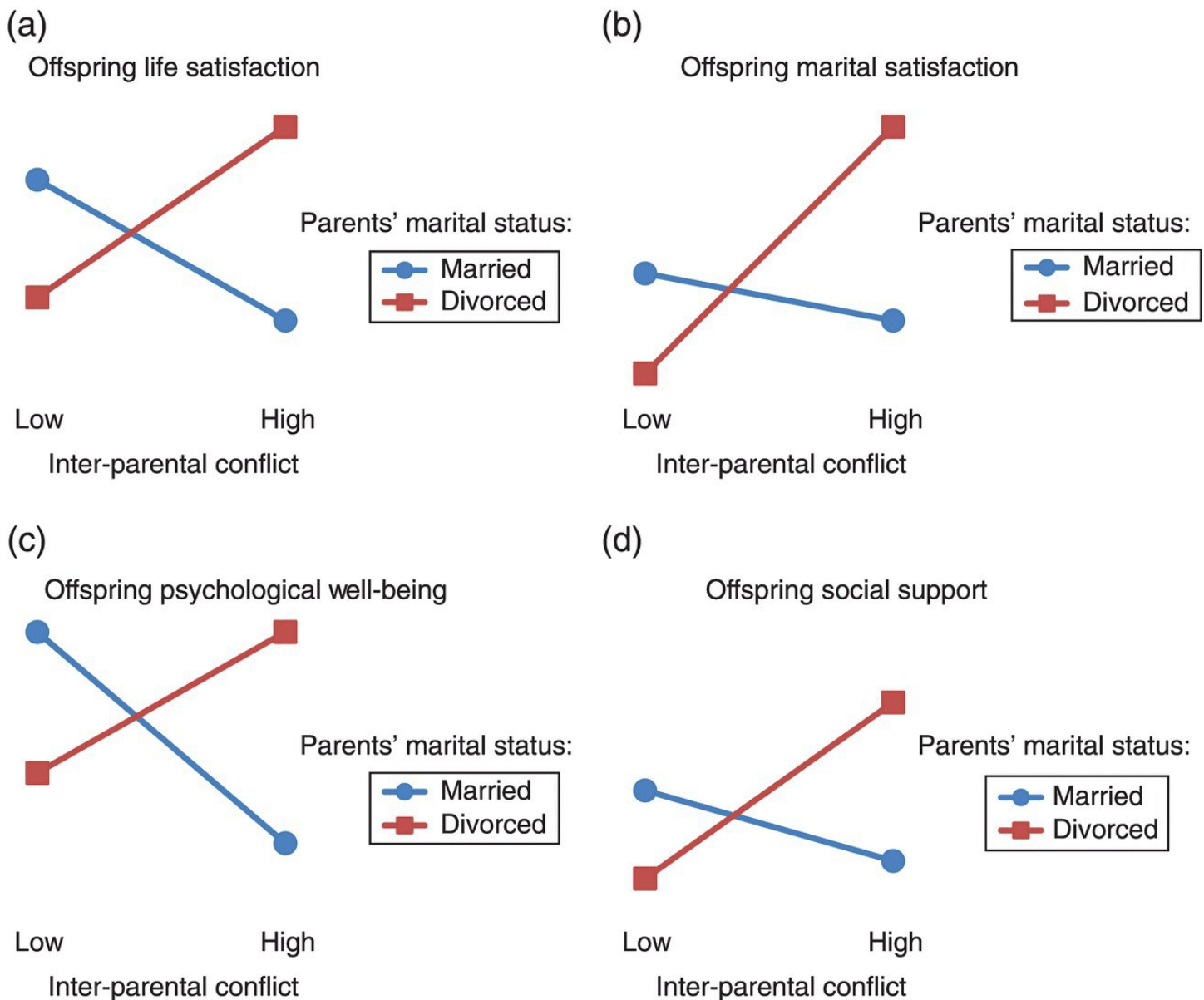


Figure 16 These four graphs represent the impact of parental conflict and divorce on the adult well-being of children.

(adapted from Amato et al., 1995, p. 910).

Conclusion

Those considering divorce have many factors to weigh, and the very fact that they are considering divorce demonstrates that there's a level of dissatisfaction with their marriage that they may not be able to overcome. Although people vary in what they consider the threshold at which a marriage can't be saved, the data on the impact of divorce – both on spouses and on children – make it clear that it's not a decision to be taken lightly. In the end, the lesson of the negative impact of marital discord and divorce is that one should choose a spouse very carefully. In terms of life satisfaction, it's the most important decision of your life. This lesson seems to have been learned well as evidenced by the dropping rate of both marriage and divorce in the United States, such that now only around 40% of first marriages end in divorce (Kreider & Ellis, 2011).

Notes

- 1 I consider the following terms synonyms: “couple therapy,” “marital therapy,” “couple counseling,” and “marital counseling.” I treat them as synonyms because the differences in treating married vs. unmarried couples are no different than other contextual factors that a therapist would consider. In addition, while the field of psychology considers there to be a difference between counseling and psychotherapy, the general public tends to treat them as synonyms.
- 2 This is not to be confused with *effectiveness research*, which refers to treatment outcome research that is done in community settings as opposed to the more controlled confines of a psychological lab. In this way, the impact of a treatment is evaluated in a manner that more realistically simulates how the treatment would typically be provided if deployed widely.