INFLUENCES OF COUPLE CONFLICT TYPE, DIVISION OF LABOR, AND VIOLATED EXPECTATIONS ON FIRST-TIME PARENTS’ INDIVIDUAL AND MARITAL WELL-BEING

By

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A DISSERTATION PRESENTED TO THE GRADUATE SCHOOL OF THE UNIVERSITY OF FLORIDA IN PARTIAL FULFILLMENT OF THE REQUIREMENTS FOR THE DEGREE OF DOCTOR OF PHILOSOPHY

UNIVERSITY OF FLORIDA

2006
ACKNOWLEDGMENTS

The saying goes, “It takes a village to raise a child.” Having become a parent to two children while undertaking my doctoral studies, I can attest to the veracity of that sentiment. It also could be said “It takes a village to earn a doctorate.” Before embarking on this journey, I would never have guessed how collective an undertaking writing a dissertation is, nor how much assistance so many would gladly give. I am incredibly thankful for the support I have received along the way.

Firstly, I thank the couples who participated in this study. In addition to the extraordinary challenges these first-time parents were undertaking during their babies’ first year, they also took the time to help a doctoral student with her research. Their input is greatly appreciated.

I thank Dr. Ellen Amatea for serving as chairperson of my doctoral committee. Her guidance, patience, conscientiousness, and scholarship have been invaluable in my pursuits. I am so appreciative of how intuitively she gave the support I needed, providing me with both structure and freedom. I am not sure how she could always tell what would help me find my way in this process, but she could. I also am grateful for her willingness to work with me “long-distance” as I completed this project and for her patience as I took some detours along the way to the dissertation’s end. I have greatly valued her feedback and suggestions.

It has been a privilege to learn from and work with my doctoral committee members. I have sincerely admired Dr. Peter Sherrard’s creativity, confidence, and
passion in the field of counseling, and his willingness to keep pushing me toward my potential. Dr. Siliva Doan has my great respect and appreciation for her academic precision and the dedication she demonstrates in providing counseling services to families in need; I thank her for helping me both to think and work systemically. I owe a debt of gratitude to Dr. Constance Shehan for helping me stumble upon a research topic I could pursue enthusiastically, and helping me to think more complexly about how gender operates in families. In addition to all my committee members’ brilliance and helpfulness, they are genuinely wonderful people and it has been an honor to know them.

I also wish to thank Dr. Caroline Pace, who served as my supervisor over the course of two internships. She has become both mentor and friend. I am in awe of her creativity, her passion for helping others, her boldness, and her strength of character. She approaches couples and family therapy with a sense of professionalism and playfulness to which I greatly aspire.

I thank my family for their unfaltering encouragement as I have progressed through my graduate studies and the dissertation writing process. I also thank them for the practical support they provided. I thank my father for his tireless computer programming which resulted in a survey website allowing me to commence this research; my mother and grandmother for getting my survey into the hands of as many new parents as possible; my sister for answering my Internet programming questions and creating a resource webpage for the participants in my study; and my parents, step-parents, and parents-in-law for providing much needed baby-sitting so I could have the time and concentration needed to write.
My husband Kevin deserves more appreciation than I have words to express. Would he have ever guessed that less than eight years after our wedding, we would have moved to Florida and back to Colorado, we would have two children, and we would have put me through a doctoral program? I thank him for his limitless support, for having faith in me and helping me keep faith in myself, for listening to my ramblings on theories and statistics, and for helping me to stay grounded and keep my sense of humor in this process. I also thank him for his friendship and dedication as we embarked on our transition to parenthood together and as we continue to care for our children.

Lastly, I thank Rachel and Zachary, our precious daughter and son who transitioned us to first- and second-time parenthood. They taught me more about my research topic than I could find in any book. They also have been present through the development of this dissertation. My daughter accompanied me on trips to the library and my son slept in my arms as I typed up sections of my dissertation with one hand. I thank them both for helping me keep things in perspective, Rachel for making me color with crayons and take her to the playground, Zachary for giving his enormous smile when I was feeling overwhelmed. I am looking forward to a life-time of learning from them both.
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Plot of First Canonical Variate
Becoming a parent, though a normative event in the family life cycle, is often experienced as acutely stressful and unbalancing. Few times in a couple’s relationship require as much adaptation and reorganization. Relationship changes associated with the transition (such as increased conflict and more gender-differentiated roles) seem to most strongly impact the couple, the individual partners, and their child. The purpose of this study was to examine how couples’ typical patterns of conflict resolution relate to their division of household labor and child care, and their individual and relational well-being.

The study’s sample included 132 married couples who were first-time parents. Their infants ranged in age from 1.54 to 13.98 months. Spouses each completed a survey assessing (a) the degree of role differentiation in partners’ completion of household and child care tasks, (b) the extent to which violated expectations about housework and child care were present, (c) partners’ level of dissatisfaction with their family roles, (d) partners’ level of marital disaffection, (e) partners’ levels of individual well-being, and (f)
the type of couple conflict behavior characteristic of the relationship, in terms of Gottman’s regulated and unregulated couple conflict types. Couple scores were computed for each of the variables, allowing investigation of the variables’ relationships across couples for most of the research questions rather than only examining the findings for mothers and fathers as separate groups.

The data were analyzed through stepwise multiple regression and canonical correlation analyses. Examining Gottman’s couple conflict types resulted in findings suggesting there are appreciably different ways couples who are first-time parents can constructively approach conflict. Like others before it, this study’s findings also reiterated the importance of fathers’ involvement in the practical and emotional care of their children, as their participation was related to marital and individual well-being. Couples’ levels of violated expectations were a significant predictor of role dissatisfaction. Although both husbands and wives tended to report violated expectations indicating the wives were doing proportionately more family work than had been expected, wives’ level of violated expectations was more related to the study’s variables than was husbands’ level of violated expectations.
CHAPTER 1
INTRODUCTION

Madison’s tiny hand clasped around her mother’s little finger while she looked up sleepily at her father. Sarah cradled their newborn baby in her arms as she and her husband smiled contentedly at one another. After nine months of anticipation, their first baby had finally arrived. They had left their home the night before as partners and they would be returning home soon as parents. Rob had arranged to take a couple weeks off from work to be at home with his wife and baby. Sarah recently had quit her job as a paralegal. After much debate, the couple decided this was for the best; Sarah simply did not earn enough money to make the cost of outside child care worthwhile. While she worried about falling behind in her career, she also looked forward to bonding with Madison on a deep emotional level. A few months later, both Sarah and Rob were struggling to settle into their new roles. Rob worked hard to provide for his family that months earlier had been one person smaller and one income richer. Sarah spent her days caring for Madison. Now that she was a “stay-at-home mom,” she also felt obliged to take on household chores that had been Rob’s responsibility before the birth of their baby. Both partners felt their spouse did not understand the unique individual strains they were under. As time went on, both felt less and less connected with each other and resentful about the isolated roles in which they found themselves.

As illustrated in this hypothetical case, parenthood brings new joys and new challenges to couples as they embark on the journey of raising a child. While couples expect changes will be necessary, most are not fully aware of how these changes will
affect their relationships. Besides all of the modifications necessary in each individual’s daily routine, couples’ relationships shift in ways that may not be anticipated or understood by the new parents. Often couples who had relatively egalitarian relationships prior to the birth of their child find themselves in “traditional” roles highly influenced by stereotypical notions of gender once they become parents (P. Cowan & Cowan, 2003; Crohan, 1996; Hackel & Ruble, 1992; Ruble, Fleming, Hackel, & Stangor, 1988; Steil, 1997; Thompson & Walker, 1989; Walzer, 1996). As couples’ roles and experiences become more divided along these traditional gender lines, couples may feel a decreased sense of intimacy as well as decreased satisfaction in their relationship (Cowan et al., 1985; P. A. Cowan & Cowan, 2003; Hackel & Ruble, 1992); past commonalities may be overshadowed by the current focus on different domains, and men and women may resent the restricted roles into which they have fallen or have been forced. New parents must grapple with the pragmatic concerns of child care. They also struggle with personal and cultural expectations of motherhood and fatherhood, and must often adjust to new divisions of labor, power, and intimacy. Partners who were once best friends may feel worlds apart.

How do couples navigate these changes? Many new parents may feel they have little control over the changes taking place in their individual lives and in their relationship. However new parents do not passively accept well-defined roles of “mother” or “father,” nor construct these roles in isolation. Rather, couples mutually structure the roles of motherhood and fatherhood through their everyday interactions, negotiations, and conflicts. Yet most of the extant research on the transition to parenthood focuses on outcome while ignoring important relational process variables
determining these roles. The lack of research examining couples’ relational processes as new parents perhaps is one reason why interventions created to alleviate some of the challenges associated with the transition to parenthood have been largely unsuccessful in altering roles and behaviors. Rather than changing couples’ division of labor (one goal of these programs), the interventions resulted in little to no change in the division of labor but increased men and women’s satisfaction with an inequitable distribution of responsibilities (e.g., Cowan & Cowan, 2000; Hawkins, Roberts, Christiansen, & Marshall, 1994). A study of a recently developed intervention evidenced positive outcomes for the couple’s relationship, but did not include a measure of fathers’ involvement in child care, despite the authors’ stated goal of increasing participation among fathers (Shapiro & Gottman, 2005); it is therefore unknown whether the intervention produced changes in parents’ role behaviors.

New parents’ marital negotiations and conflict behaviors comprised the core of the present investigation. The purpose of the study was to examine how couples’ typical patterns of conflict resolution relate to their division of household labor and child care, as well as to their individual and relational well-being or strain. It was expected that quite different approaches to conflict could be equally effective, and that learning more about conflict behaviors promoting individual and marital well-being along with an equitable division of labor would be helpful for a variety of professionals who work with new parents. Much of the research on the transition to parenthood has painted a discouraging picture of its challenges for new parents and the therapists, counselors, and family life educators seeking to ease this transition; the present study aims to illuminate relational
processes already at work in the partnership that can serve as resources to couples who have become parents.

Scope of the Problem

Becoming a parent is a normative event in the lives of most individuals; approximately 80% of women have children at some point in their lives (United States Census Bureau, 2001) with rates presumably similar for men. Approximately three-quarters of the 4,021,726 infants born in the United States in 2002 were born to married or cohabitating couples (Bumpass & Lu, 2000; Martin et al., 2005). Thus, each year in this country, millions of couples make the transition to parenthood. Because becoming a parent is a normative event in the family life cycle and because couples often experience bringing a baby into the world as a joyous occasion, the stresses involved with this transition are often overlooked and underestimated by mental health professionals, public policy makers, and couples themselves (P. Cowan & Cowan, 2003; P. A. Cowan & Cowan, 2003). However, the changes and challenges experienced by these couples who seem “low-risk” (P. Cowan & Cowan, 2003; P. A. Cowan & Cowan, 2003) compared to many other populations can have long-lasting and often harmful consequences for individuals and families.

The transition to parenthood seems to be most difficult for women, largely because they are typically the primary caretakers of their babies (C. P. Cowan & Cowan, 1988; Cowan et al., 1985; Fox, 2001; Twenge, Campbell, & Foster, 2003; Walzer, 1996). The individual difficulties women experience when they become mothers range from extreme fatigue experienced by the vast majority of new mothers (Ruchala & Halstead, 1994) to serious postpartum depression experienced by a small minority of women (American Psychiatric Association, 2000; Areias, Kumar, Barros, & Figueiredo, 1996; Campbell &
Cohn, 1991). Research on men’s transition to parenthood has been limited, but the data available indicate men also face individual challenges as they transition to parenthood. Men seem to experience more strain while their partners are pregnant, and experience increased well-being after their children are born (Condon, Boyce, & Corkindale, 2004). Some fathers experience dysphoria in the early months of new parenthood, but the impact of this disappears by the end of the child’s first year (Pedersen, Zaslow, Cain, Suwalsky, & Rabinovich, 1987). New fathers also become more involved (psychologically and in terms of actual time spent) in their work outside the home (Condon et al., 2004; Cowan & Cowan, 2000).

Relationship changes seem to have the most far-reaching effects for the couple, the individual partners, and their child. One of the most consistently documented changes associated with the transition to parenthood is a small but significant drop in marital satisfaction (Twenge et al., 2003). Couples also report a “declining salience” (Hackel & Ruble, 1992, p. 955) of their relationship (Cowan & Cowan, 2000). Yet women tend to become more dependent (financially and emotionally) on their partners after having a child (Fox, 2001). Couples also develop more “traditional” gender-stereotyped family roles and divisions of labor than either partner had expected (P. Cowan & Cowan, 2003; Crohan, 1996; Hackel & Ruble, 1992; Ruble et al., 1988; Steil, 1997; Thompson & Walker, 1989; Walzer, 1996). These processes in the couple’s partnership have been linked to strain for both men and women (Cowan et al., 1985; Hackel & Ruble, 1992; Ruble et al., 1988). Children may also be affected if their parents have fewer personal resources for their care, and if they are subject to spillover-effects from parental conflict
that is destructive (Belsky & Kelly, 1994; Cox, Paley, Payne, & Burchinal, 1999; Hawkins & Roberts, 1992).

Conflict does increase among partners who have become parents, with the division of household labor identified by both men and women as the primary topic of disagreement (Cowan & Cowan, 2000; Cowan et al., 1985). The overall patterns of conflict behavior couples use to manage discord appear to remain relatively stable across the transition to parenthood (Raush, Barry, Hertel, & Swain, 1974), although some couples improve or regress in their functioning (Lewis, 1989). New parents report becoming more efficient problem-solvers, but they are also more likely to try to avoid engaging in conflict (Cowan et al., 1985; Crohan, 1996). One way new parents avoid conflict over imbalances in the division of labor is through reliance on a number of “coping mechanisms” that allow couples to minimize the effect of contentious topics; however, these coping mechanisms require the endorsement of both partners and therefore are fragile and vulnerable to dissolution (Backett, 1982). Little is known about constructive conflict behaviors across the transition to parenthood.

**Theoretical Framework**

**The Family Life Cycle**

Three theoretical frameworks guide this study, the first of which is the family life cycle perspective. The family life cycle provides a context for understanding the developmental processes of families. As opposed to the individual’s developmental life cycle, it is marked by “multiple developmental trajectories” (Parke, 1988 as quoted in Cowan, 1991, p. 7). Hence, one family member’s developmental process may intersect or overlap to change the meaning of other family members’ development. Relationships in families change as they progress through the life cycle. McGoldrick and Carter (2003)
noted “boundaries shift, psychological distance among members changes, and roles within and between subsystems are constantly being redefined” (p. 376). Although broad stages in the family life cycle can be defined along with accompanying norms and expectations, the cycle is contextualized by both culture and time (McGoldrick & Carter, 2003). However, there are “unifying principles that define stages and tasks, such as the emotional disequilibrium generated by adding and losing family members during life’s many transitions” (McGoldrick & Carter, 2003, p. 379).

Transitions comprise one such unifying principle of this framework, denoting the end of one stage in the family life cycle and the beginning of another. Although one might think of a transition as a discrete event, it is more appropriately understood as an emerging process with varying impacts across different families (Cowan, 1991). Transitions contain both danger and opportunity. Cowan (1991) argued they are “times of new and heightened affective arousal” carrying the potential of temporary “affect disregulation” and negative impacts on relationships (p. 18). Additionally, “the individual, couple, or family must adopt new strategies, skills, and patterns of behavior to solve new problems” (Cowan, 1991, p. 17). As such, family life cycle transitions require second-order changes in functioning rather than simple modifications in the family system (McGoldrick & Carter, 2003).

The transition to parenthood is no exception. As families transition from a stage in which the couple relationship was established to the stage of “families with young children,” relationships must be reorganized and new tasks must be accomplished (Carter & McGoldrick, 1999). Galinsky (1981) proposed a model of parental development with its first stage encompassing the time between the mother’s pregnancy and the birth of the
child. She referred to this as the “image-making stage” during which couples form hopes and expectations about parenting. This stage largely involves preparing for changes in relationships and roles. Most family life cycle theorists have focused on developmental tasks required of the couple after the arrival of the baby, with similar tasks identified across models (e.g., Carter & McGoldrick, 1999; Cusinato, 1994; Galinsky, 1981). These tasks include the couple making room in their relationship for the acceptance of the infant into the family, coming together to accomplish caring for the child as well as completing household tasks and providing financially for the family, reorganizing relationships with the extended family, and reorganizing relationships with other systems such as employers. Like other transitions, this stage in the family life cycle contains both dangers and opportunities. Some couples accomplish these tasks admirably and function better than ever; however others seem to regress in marital competence, at least temporarily (Lewis, 1989).

An Interactionist View of Gender

A second theoretical framework informing this study centers around an interactionist view of gender. Because the experiences and endeavors of men and women differ greatly across the transition to parenthood, a framework in which these differences can be understood is needed. Various explanations of gendered behavior have emerged through the years, with past theories focusing largely on “sex roles” or “gender roles.” More recently, feminist scholars have emphasized the multiple levels at which the concept of gender is constructed and have particularly attended to how gender is created through social interaction. Gender is now viewed not as a well-defined quality of an individual, but rather as something that is “done” through accumulations of everyday practices and relationships with others (West & Zimmerman, 1987).
Past assumptions regarding sex roles were largely contested because they oversimplified the impact of gender on behavior. As Ferree (1990) asserted, “Even feminist descriptions of ‘sex roles’ usually assumed that expected behavior was clear, consistent, and uniform, and they neglected evidence of contradiction and struggle” (p. 867). In their emphasis of masculine and feminine gender roles, these frameworks fit well with structural-functionalist notions of instrumental and expressive roles in families. Yet each of these roles is not as clearly defined or as easily entered into as the structural-functionalist perspective assumed, neglecting to acknowledge how individuals interpret these roles and how roles are negotiated in relationships (Backett, 1982). Additionally, this view of gender emphasized the responsibility of families in socializing children into gender roles. Families were blamed for the reproduction of gender differences, rather than gender bias in institutions and culture being seen as leading families to socialize themselves accordingly (Ferree, 1990).

More recently, theorists have recognized that attempting to explain gender and gendered behavior at any one level provides an incomplete picture. Instead, the new “gender perspective simultaneously emphasizes the symbolic and the structural, the ideological and the material, the interactional and the institutional levels of analysis” (Ferree, 1990). While a great deal of attention has been placed on how individuals learn, express, and experience gender, and growing consideration has been given to cultural and institutional influences on gender, the subtle reproduction of gender-differentiated behavior at the interactional level is becoming a more prominent focus of researchers (Fox, 2001). As Gerson and Peiss (1985) stated, “Gender is not a rigid or reified analytic
category imposed on human experience, but a fluid one whose meaning emerges in specific social contexts as it is created and recreated through human actions” (p. 317).

West and Zimmerman’s (1987) concept of “doing gender” captures the interactional nature of constructing gender. These theorists asserted that gender is not an isolated characteristic of individuals, but rather is a social enterprise becoming both “an outcome of and rationale for various social arrangements” (p. 126). They noted the act of “doing gender” requires an understanding of what constitutes gender-appropriate behavior, which varies across time and context. Despite the fact that individuals must often purposefully mold their behaviors to be deemed gender-appropriate, “doing gender” creates an illusion that gender differences are natural and inherent. As such, “doing gender” allows imbalanced societal patterns and institutions to appear as if they are only reflecting the natural and essential differences between the sexes. West and Zimmerman (1987) contended gender done “appropriately” legitimizes these societal patterns and institutions, whereas gender done “inappropriately” calls into question the individual, not the institution.

Although this concept of “doing gender” provides a helpful understanding of how individuals actively create gendered behavior, the framework can over-focus on the individual’s relationship with society or culture while not focusing enough on the influence of personal relationships (Fox, 2001). Individuals do not simply “do gender.” They “do gender” in various forms and have varying responses to its practice. They also “do gender” in the context of relationships. Significant others play a particularly important role in this process because they may support a person’s way of “doing gender” or argue against it. Significant others may persuade or coerce a person into a different
way of “doing gender,” and may constrain his or her choices. Individuals’ own ways of “doing gender” through everyday practices influence what options are available to the others in their lives. Through this reciprocal process, meanings of gender are co-constructed through relationships (Fox, 2001).

Ferree (1990) stated “The fundamental question is how the illusion of a gender dichotomy is constructed and maintained in the face of between-sex similarity and within-sex difference, and the answer is found in the constant and contentious process of en-gendering behavior as separate and unequal” (pp. 868-869). This “constant and contentious process” occurs at many levels, including in relationships and families. Ferree acknowledged families as sources of both struggle and support. This dual aspect can be seen in families’ efforts to change the ways they “do gender.” The separate spheres once reified in families have blurred, with women participating at higher rates in paid employment and men participating more in household work. Yet men’s participation in family work is still limited and women are not yet fully integrated into the sphere of business. Gerson and Peiss (1985) distinguished between macro- and micro-level boundaries, noting reduction of the macro-level boundaries between the public and private spheres may be coupled with strengthening of micro-level boundaries. They provide the example that as macro-level boundaries have shifted so more women are in the paid workforce and more men participate in household work, micro-level boundaries of meaning and interpretation have strengthened; as such women’s income is seen as secondary and men’s household contributions only constitute “helping,” thereby reinforcing the gender dichotomy.
Families’ divisions of labor effectively demonstrate the interactional construction of gender. As Berk (1985) observed:

Household members “do” gender, as they “do” housework and child care, and what I have been calling the division of household labor provides for the joint production of household labor and gender; it is the mechanism by which both the material and the symbolic products of the household are realized. (p. 201)

The “doing” of gender, like the “doing” of family work, is negotiated and contested in families, and occurs through relationships rather than in isolation. Of particular interest in the present study is how new parents negotiate the “doing” of both gender and family work in their relationships. Fox (2001) highlighted the importance of this focus, noting “All things considered, motherhood may be the most gender-enforcing experience in the lives of many women” (p. 374), suggesting motherhood may be a particularly potent form of doing gender. Fatherhood may similarly affect a man, as he is at the very least impacted by his partner’s “doing” of gender-influenced motherhood.

The interactionist view of gender acknowledges the inequities and imbalances resting on the “separate and unequal” dichotomy of gender. Yet this view also highlights individuals’ abilities to effect change: “The concept of negotiation suggests human agency. Both women and men are active participants, sometimes asking or inviting, sometimes demanding that resources be shared or reallocated” (Gerson & Peiss, 1985, p. 322). Challenging and changing inequities can occur as both top-down and bottom-up processes. Couples do not have to wait for society to become more fair, just as women do not have to wait for their partners to become more “enlightened” about their division of household labor; changes can be made on an individual level that impact relationships, just as changes made on relational levels can add up to impact the larger society.
Gottman’s Typology of Marital Conflict

A theory of marital conflict based on a typology created by John Gottman (1994) comprises the final theoretical framework for this study. Gottman developed his typology of marital conflict through his extensive research with married couples, which included observing and recording couples’ verbal and nonverbal conflict behaviors as well as their physiological responses to conflict. He found some couples could regulate their affect and interactions such that these regulated couples consistently demonstrated more positive than negative interactions during conflict and seemed to have stable relationships with lower risk of divorce. Nonregulated couples, on the other hand, demonstrated fewer positive interactions and seemed to be heading toward divorce. He ultimately distinguished five types of couples within these two broad categories, delineating three types of regulated couples and two types of nonregulated couples.

Gottman (1994) contended the five types of couples are qualitatively different from each other, though similar underlying processes determine their stability. He proposed a “theory of balance” in which the overall ratio of positive to negative interactions over time accounts for the stability or instability of the five couple types; regulated couples demonstrated a ratio of about five positive interactions for every one negative interaction while nonregulated couples demonstrated closer to a one-to-one ratio. Raush and his colleague’s (1974) work provides support for Gottman’s conceptualization of couple conflict patterns that are relatively stable over time; these researchers found that newlywed couples establish communication and conflict patterns as early as the fourth month of marriage that are remarkably stable, even across the transition to parenthood. Rather than viewing conflict behaviors in isolation, Gottman’s framework allows conflict behavior to be interpreted in the context of a couple’s typical pattern of interaction.
Additionally, this framework challenges a “one-size-fits-all” mentality about conflict, instead suggesting very different approaches to conflict can be functional, with each of the three regulated types containing both promise and peril.

Conflict-avoiding couples demonstrate one regulated type of marriage. Gottman (1994) noted conflict-avoidance has often been seen by researchers as dysfunctional but his own research showed it can be functional. He stated these couples may be more accurately conceptualized as minimizing conflict rather than avoiding it altogether. Conflict-avoiding couples do not see themselves as avoiding conflict, but rather see their expression of feelings to each other as a way of engaging in conflict. However, these couples generally do not try to persuade each other and do not analyze their conflicts. Gottman noted each of the couple types carries risks, and asserted loneliness may be a risk for conflict-avoiding couples as they express very little negative affect but also little positive affect. He also observed that conflict-avoiding couples experience a great deal of physiological arousal despite the lack of open conflict, and suggested the lack of an outlet for this reactivity may lead to somatic problems. Lastly, he expressed concern that conflicts may arise which cannot be avoided or minimized and that conflict-avoiding couples may lack the conflict resolution skills to manage these; in such cases, he argued, conflict-avoiding couples may deteriorate into a nonregulated hostile type of relationship.

Volatile couples present quite a different picture, with a great deal of both positive and negative interactions, high emotionality, and high expressiveness in both partners. Gottman observed that volatile couples have explosive conflicts followed by passionate resolution and making-up. These couples engage in strong persuasion attempts throughout their conflicts, especially as they first begin a conflict discussion. Gottman
noted volatile couples are usually able to use their positive interactions to repair negative exchanges, but expressed concern that some negative interactions may be too hurtful to be repaired; if this occurs, volatile couples also run the risk of deteriorating into a nonregulated hostile type of relationship.

The final type of regulated couple Gottman described consists of validating couples. These couples engage in conflict having a calm undercurrent. During conflicts, partners validate each other’s points of view verbally and nonverbally even if they disagree with those viewpoints. There is a sense of mutual engagement with the problem, with both partners feeling like they are on the same side even though they disagree. The primary risks Gottman hypothesized about validating couples were that their relationships may grow to become more of friendships than romances and partners can become increasingly distant. He noted validating couples “may be particularly vulnerable at major life transitions, such as the transition to parenthood” (Gottman, 1994, p. 191).

Gottman delineated two types of nonregulated couples, including hostile couples and hostile/detached couples. Hostile couples are characterized by a high degree of conflict engagement and defensiveness. Hostile/detached couples are generally disengaged, but have brief episodes of very negative interactions; partners in these couples demonstrate more contempt and disgust for each other than do hostile couples. Gottman suggested the hostile/detached couple type may represent a further deterioration of the hostile couple type. Gottman has often grouped together the two types of nonregulated couples, as did the authors of a survey based on his conceptions of couple conflict types (Holman & Jarvis, 2003).
Besides explicating his typology of marital conflict, Gottman (1994) addressed the importance of match between partners’ preferred conflict styles. He posited a “mismatch theory” (p. 235), suggesting the hostile and hostile/detached types may represent couples’ failed attempts to construct a regulated type as the preferences of the two partners differ. Although his data did not allow for a thorough examination of this hypothesis, he did find that the partners in the two nonregulated types were more dissimilar from each other in their conflict behaviors than were the partners in the regulated types.

Intersections of the Theoretical Frameworks

The three theoretical frameworks described above, though not typically integrated, are mutually informing and have areas of intersection and overlap valuable to the present study. For example, how gender is “done” in a couple may be dependent on their place in the family life cycle. Cusinato (1994) notes “The relation between parenthood and parenting is dialectic: the meaning of parenthood anticipates, accompanies, and condenses the parenting experience over the life cycle” (pp. 84-85). Thus how couples construct the meanings of fatherhood and motherhood is tied to their experience of the transition to parenthood; the transition from one lifecycle stage to another structures gendered interactions. Backett (1982) quoted Berger and Kellner (1970), noting, “Whilst the couple might approach marriage (and parenthood) with taken-for-granted culturally derived preconceptions, ‘these relatively empty projections now have to be actualised, lived through and filled with experiential content by the protagonists’” (p. 6). As such, vague ideologies couples may possess about gender and marital and parental roles early in their relationship must be translated into daily practices as they become parents. This is consistent with Cowan’s (1991) contention that “the transition amplifies processes already in motion before the transition begins” (p. 20).
The interactionist view of gender also intersects with the family life cycle perspective in explaining how couples’ role arrangements may be formed from a narrow array of options. Because the family life cycle consists of events and life stages deemed to be normative, it carries with it implicit “norms” about how families navigate these points in time. These perceived standards may restrict choices or perceptions of alternatives (Berk, 1985), particularly during times of stress such as at transitions. As Rosen (1999) asserted:

At this crucial crossroads of the family life cycle, many young adults falter. Ill-equipped to skillfully assume the guidance and responsibility of children (“I feel like a child myself!”) and seeking some sense of grounding in how to parent, both men and women often initially embrace a return to tried-and-true traditional parenting roles. Even if they have been successful in negotiating a workable marital system, the arrival of children may shake its foundation. (p. 134)

Further enforcing this pattern is the fact that cultural expectations about “doing gender” forcefully collide with life cycle expectations: “For both sexes, parenthood seems to provide the final ticket for acceptance into adulthood: the woman mothering and the man ‘providing’” (Carter, 1999, p. 249).

This division of responsibilities may be particularly difficult for women, “whose role has been to bear emotional responsibility for all family relationships at all stages of the life cycle” (Carter & McGoldrick, 1999, p. 8). Additionally, behaviors developed for a particular life stage (such as mothers being primarily responsible for household work and child care during early parenthood) may resist change even after a transition has passed and the standards do not make much logical sense (such as mothers’ continuing primary responsibility even after they return to paid employment; Berk, 1985).

Additionally, issues related to the family life cycle and to couples’ conflict patterns overlap. As described above, new parents have a number of tasks to accomplish as they
transition to parenthood, and negotiation will be necessary to complete these tasks. How a couple negotiates and resolves conflict will largely determine their success in carrying out these responsibilities. Couples’ conflict styles appear to remain relatively stable across transitions (Raush et al., 1974), though transitions may also require couples to develop new skills to face new challenges.

Gottman’s typology of marital conflict also intersects with an interactionist view of gender. Gottman (1994) suggested his typology may mirror a typology of gender traditionalism among couples proposed by Fitzpatrick (1988). Like the three regulated types Gottman delineated, Fitzpatrick’s three types of couples all demonstrated high marital satisfaction. Gottman suggested his validating couples might be equivalent to Fitzpatrick’s “traditional couples” who were characterized by stereotyped gender roles and separate spheres, but high levels of affection and fairly low levels of conflict. Volatile couples might represent Fitzpatrick’s “independent couples” who were egalitarian, assumed androgynous roles, expressed a great deal of both positive and negative feelings, and highly valued each partner’s independence. Gottman stated conflict-avoiding couples might be similar to Fitzpatrick’s “separate couples” who expressed traditional values but valued independence and having their own space, while largely avoiding engaging in conflict.

Another possible intersection between a theory of conflict and a theory of gender is the consideration of men and women’s different conflict behaviors. Although Gottman’s couple conflict types focus on overall relational patterns rather than individual behavior, Gottman (1994) described several differences in how men and women tend to approach conflict, with women tending to confront in conflicts and men tending to withdraw.
These differences may be exaggerated and become a difficult demand/withdraw pattern when the husband’s goals (e.g., not participating in housework) can be achieved unilaterally and cooperation is needed for accomplishment of the wife’s goals (e.g., sharing housework responsibilities) (Kluwer, Heesink, & Van de Vliert, 1997). Women may resort to making demands or pressuring their partners when they are unable to achieve their goals in other ways. As Gerson and Peiss (1985) observed, “Given their relative lack of structural power, women have fewer resources with which to negotiate, experience fewer situations in which they can set up negotiations, and derive fewer advantages from their negotiations” (p. 323).

Still conflict and negotiation are necessary for changing the status quo and can be successful. It is around this issue that all three of the theoretical frameworks described above converge. Referencing Gerson and Peiss’s (1985) work, Ferree (1990) contended “Much of the work of doing gender is taken for granted and thus made invisible, but at boundaries and points of change these gender dynamics become open to explicit negotiation” (p. 869). The transition to parenthood, rather than a point in the life cycle destined to produce arduous conflict and inequality, provides an opportunity for couples to actively negotiate relationships and roles of their choosing.

Need for the Study

Despite research evidence pointing to an increase in couple conflict across the transition to parenthood, little is known about how couples express conflict and negotiate their parenting roles. This gap in the research literature is surprising since many researchers investigating the transition to parenthood seek to understand how couples’ relationships change after they have had a child. Yet much of the research examining the construction of parenting roles focuses on how individuals develop or function in their
roles rather than on how couples decide upon these roles. Qualitative researchers have looked more closely at the importance of couples’ interactions in this process, but still tend to focus on the individual’s construction of roles rather than the couple’s role negotiations. Significantly more of both the quantitative and qualitative research has investigated women’s transition to parenthood than men’s. Even when examining relational issues like the division of labor, much of this research has not included men in the samples. Instead, fathers’ behaviors and adjustment are often estimated from their partners’ reports. Those studies that examine couples tend to analyze partner data separately, looking at “mothers” or “fathers” as a group, without examining how one partner’s responses are related to the other’s.

Much of the extant research has focused on outcome variables rather than processes. For example, Hackel and Ruble (1992), Ruble and her associates (1988), and Cook and his colleagues (2005) investigated unmet expectations regarding couples’ divisions of labor, but did not examine how these couples developed divisions of labor that contradicted their expectations and were perceived as unfair. Cowan and Cowan (1988) described quite divergent parenting roles reported by the men and women in their study, but did not study the particular couple interactions that may have led to these different roles. In another study, Cowan and Cowan (1985) did examine problem-solving strategies along with several other variables but did not report the results of the problem-solving measure. Other research has examined couple process variables present in the relationship before the birth of the baby, and has predicted future adjustment based on these variables (e.g., Shapiro, Gottman, & Carrere, 2000). While this approach may be helpful to couples who have not yet had children, a focus on the importance of specific
relational factors present before the arrival of children does not provide much direction for couples who have already become parents and does not focus on variables over which new parents have current control.

Few studies have looked specifically at the conflict behaviors of couples transitioning to parenthood. Among the studies that have, these largely have either focused on problematic interactions, or have set up a dichotomy between constructive and destructive conflict where constructive conflict was narrowly defined (e.g., Crohan, 1996; Kluwer et al., 1997). Gottman (1994) contended both avoidance and volatility have been judged in past research as dysfunctional, but that both behaviors can be healthy approaches to conflict depending on the context and the couple’s preferred style of interaction. Gottman argued each of his regulated couple conflict types has strengths and weaknesses; knowing how this is demonstrated in division of labor conflicts among new parents may suggest beneficial strategies for managing conflict and help identify pitfalls into which each couple conflict type may fall such that those seeking to assist these couples can help them avoid hazards and capitalize on their strengths. As such, research which examines a range of functional conflict types seems needed.

The present study attempted to build upon the strengths of past research while addressing many of the problems described above. The focus of this study was on the couple as a unit; wherever possible, partners’ individual scores were converted to produce couple scores, moving the study from an individual to a relational level of analysis. Couple conflict type comprised the heart of the study, and it was expected the results would demonstrate several different paths to effective conflict negotiation among new parents. Lastly, unlike most studies of the transition to parenthood, the present study
assessed both individual and relational well-being and examined how these are related to specific couple conflict types.

**Purpose**

The purpose of this study was to investigate the influence of couple conflict type on new parents’ division of labor (particularly the extent to which partners share household and child-related tasks), marital disaffection, and individual well-being. A cross-sectional survey method was used to study couples who recently transitioned to first-time parenthood. The sample included 132 married couples whose child was between 2 and 13 months of age at the time they completed the survey. The primary variables included for study were (a) the type of couple conflict behavior, (b) the extent to which couple’s role expectations about parenting formed before the birth of the baby were met, (c) the couple’s division of household labor, specifically their sharing of household and child care tasks, (d) partners’ satisfaction with their family roles, (e) the couple’s level of marital disaffection, and (f) partners’ level of individual well-being.

**Research Questions**

To guide the examination of the variables described above, the following research questions were devised:

1. Do task differentiation (of family household tasks and child-related tasks), violated expectations, marital disaffection, individual well-being, age, infant age, income level, and each of the couple conflict type scores (volatile, validating, conflict-avoiding, and hostile) serve as predictors of role dissatisfaction?

2. Do task differentiation (of family household tasks and child-related tasks), role dissatisfaction, marital disaffection, individual well-being, age, infant age, income level, and each of the couple conflict type scores (volatile, validating, conflict-avoiding, and hostile) serve as predictors of violated expectations?

3. Do task differentiation (of family household tasks and child-related tasks), role dissatisfaction, violated expectations, individual well-being, age, infant age, income
level, and each of the couple conflict type scores (volatile, validating, conflict-avoiding, and hostile) serve as predictors of marital disaffection?

4. Do task differentiation (of family household tasks and child-related tasks), role dissatisfaction, violated expectations, marital disaffection, age, infant age, income level, and each of the couple conflict type scores (volatile, validating, conflict-avoiding, and hostile) serve as predictors of individual well-being?

5. Do task differentiation (of family household tasks and child-related tasks), role dissatisfaction, violated expectations, marital disaffection, individual well-being, age, infant age, and income level predict the couple conflict type discrepancy score?

6. Is there a relationship between the set of variables (task differentiation of family household tasks and child-related tasks, violated expectations, role dissatisfaction, marital disaffection, individual well-being, age, infant age, and income level) and the set of couple conflict type variables (volatile type score, validating type score, conflict-avoiding type score, and hostile type score)?

**Definition of Terms**

- **Couple Conflict Type** refers to the typical pattern of conflict behavior engaged in by a couple. John Gottman (1994) produced a theory of and research on couple conflict types, detailing a typology of regulated stable and nonregulated unstable marriages. Gottman noted couple conflict types differ in partners’ timing and level of persuasion attempts, as well as the presence or absence of contempt, defensiveness, and withdrawal in conflict interactions.

- **Division of Labor** represents families’ distributions of responsibilities (e.g., providing for the family financially, caring for children, and completing housework).

- **Individual Well-Being** is defined here as a subjective state consisting of the absence of psychological distress (i.e., anxiety or depression) and the presence of positive emotional states (i.e., general positive affect and behavioral/emotional control).

- **Marital Disaffection** is a gradual process involving deterioration of caring, intimacy, and attachment in a marriage. It represents a general unhappiness with the relationship, rather than simply dissatisfaction with some areas of the marriage (Kayser, 1996; Kersten, 1990).

- **Role Dissatisfaction** signifies the degree to which a couple is discontented with their mutual role arrangements resulting from their division of labor. It is defined here as couples’ dissatisfaction with their distribution of responsibility and work related to family household tasks and tasks related to caring for their child.
• **Task Differentiation** refers to the degree of couples’ role differentiation in their completion of family-related tasks. A division of labor characterized by task differentiation contrasts with a division of labor characterized by task sharing. Task differentiation is characterized by each partner having separate responsibilities, whereas task sharing involves partners’ joint completion of family tasks (Cowan, Cowan, Coie, & Coie, 1978).

• **Transition to Parenthood** is the term coined to describe the process in the family life cycle of a couple having their first child and becoming parents. Rather than simply the discrete event of the child’s birth, the transition to parenthood encompasses events, developmental tasks required of the couple, emotional changes, and shifts in relationships beginning before the baby’s arrival and continuing beyond the birth as the family adapts to a new life cycle stage.

• **Violated Expectations** are hopes and intentions men and women form before the birth of their baby that are not actualized after the baby’s arrival. These may be expectations about any aspect of the transition to parenthood, but frequently center on expectations about the couple’s division of labor and parenting roles (Hackel & Ruble, 1992; Ruble et al., 1988).

**Organization of the Study**

Literature related to the purpose of the present study is reviewed in Chapter 2. Chapter 3 provides an overview of the methods employed in the study, including sample selection procedures, data collection procedures, delineation of the relevant variables, descriptions of the instruments to be used in the study, and demarcation of the hypotheses to be investigated. A description of the sample is also included in Chapter 3. The results of the study are presented in Chapter 4. Chapter 5 includes a detailed discussion of the findings and further implications of the results.
CHAPTER 2
REVIEW OF RELATED LITERATURE

For many couples, nothing is more joyous than bringing a baby into the world. As partners make the transition to parenthood, they change and grow as individuals and their relationships with each other and their new baby often involve a profound and deeply felt love. Yet few times in a couple’s relationship require as much adaptation and reorganization. Becoming a parent, though a normative event in the family life cycle, is often experienced as acutely stressful and unbalancing. Despite nine months of preparing for the new arrival and forming expectations about parenthood, many couples find they are not prepared for the changes set off in their daily lives and in their relationships by the addition of an infant. The transition to parenthood is in many ways paradoxical: the most wonderful and most overwhelming process in many couples’ lives, a normative process for which couples prepare that often ultimately disorients them with changes they had not anticipated.

In this chapter, literature related to couples’ transitions to parenthood will be explored. Literature included in this review examines the key changes couples experience as they transition to parenthood, including the development of parenting roles and a division of household labor. Literature related to couples’ interactions and relational processes as they transition to parenthood comprises another primary focus.
Key Changes Across the Transition to Parenthood

**Individual Changes**

While caring for a new baby may encourage individuals’ positive development, it may also represent a stress associated with difficult challenges. Researchers studying the transition to parenthood have traditionally focused more on changes women experience (Condon et al., 2004). This focus of study has established that in addition to the happiness many women feel about becoming mothers, a wide continuum of strain is also present. Exhaustion is commonly experienced by new mothers, with 87% reporting fatigue in the first few weeks after the birth of their babies severe enough to interfere with their relationships and responsibilities (Ruchala & Halstead, 1994). Anxiety and depression are common, especially during the first month postpartum (Gjerdingen & Chaloner, 1994). Approximately 70% of mothers experience “baby blues” shortly after childbirth (American Psychiatric Association, 2000), and 10 to 15% experience postpartum depression (Areias et al., 1996; Campbell & Cohn, 1991). Longitudinal studies indicate postpartum depression rates may be significantly higher when assessed over the course of a year (Areias et al., 1996; Mattheny, Barnett, Ungerer, & Waters, 2000).

Men’s transition to parenthood has been researched on a relatively cursory level compared to women’s experience (Condon et al., 2004). For men, symptoms seem to appear earlier than they do for women; a longitudinal study of 204 men found higher levels of depression for men early in their partners’ pregnancies and improvement in symptoms within the first three months after the birth of the baby (Condon et al., 2004). Another study (Pedersen et al., 1987), in which 25 fathers were surveyed, interviewed, and observed, found fathers’ reports of dysphoria or “blues” had few lasting impacts. In this study, fathers experiencing dysphoria interacted less with their three-month-old
infants (e.g., spending less time in physical contact with their infants, showing less affection, providing less caregiving) compared to fathers who did not report having the “blues.” However, this difference disappeared when the families were assessed at 12 months after the birth of the baby; in fact, the involvement of the fathers who had not experienced dysphoria decreased while the fathers who had experienced dysphoria at three months increased their involvement, so that the fathers who had experienced “blues” essentially caught up with the other fathers in terms of involvement.

In Condon and his colleagues’ (2004) study, men whose partners were pregnant reported more alcohol use and more somatic symptoms than new fathers; data was not available about the men’s functioning before their partners’ pregnancies, so it is difficult to determine whether these results reflect an increase in these symptoms during the partners’ pregnancies or a continuation of their previous patterns. Another change reported for men concerns their involvement in paid employment, with research indicating men increase their psychological involvement in work and their actual hours devoted to work outside the home across the transition to parenthood (Condon et al., 2004; Cowan et al., 1985). Based on the extant research, it seems for both men and women, the impact of the transition to parenthood is felt quite early. However, becoming a parent appears to affect women more strongly, with men reporting fewer changes across the transition to parenthood (Condon et al., 2004; Cowan & Cowan, 2000; Fox, 2001). In fact, for fathers, “the lack of change...from pregnancy to 1 year is far more striking than changes that occurred” (Condon et al., 2004, p. 62). In general, fathers describe difficulty early in their partner’s pregnancy, improvement during the first three months after the
baby’s birth, and a lack of change from this point through the baby’s first year (Condon et al., 2004; Hackel & Ruble, 1992).

Changes in the Couple’s Relationship

Decreased marital satisfaction

The focus of much of the extant research on the transition to parenthood has been on changes occurring in the couple’s relationship when couples have their first child. Perhaps the most researched topic in this area concerns relationship satisfaction. A number of research studies have indicated marital satisfaction declines upon the transition to parenthood (e.g., Cowan & Cowan, 2000; Crohan, 1996; Grote & Clark, 2001; Pancer & Pratt, 2000; Shapiro et al., 2000; Van Egeren, 2004), while others have not established this link (e.g., Kurdek, 1998). A meta-analysis of 97 studies published between 1974 and 2000 found marital satisfaction consistently decreases across the transition to parenthood (Twenge et al., 2003). In 90 of the 97 studies, parents were found to have lower marital satisfaction than non-parents. The authors of this analysis summarized four key theories possibly explaining the decline and tested the assumptions of each theory by examining trends in the research data. These theories suggested decreased marital satisfaction is caused by role conflict, restriction of freedom, sexual dissatisfaction, or financial cost. While the results did not indicate a significant impact of sexual dissatisfaction or financial cost on marital satisfaction, the researchers identified several trends supporting the role conflict and restriction of freedom theories. Across the studies included in the meta-analysis, women (whom the authors noted are likely to experience greater role conflict and restriction of freedom) experienced greater declines in marital satisfaction than men. Mothers of infants reported the lowest marital satisfaction of any group, with mothers of older children reporting somewhat higher satisfaction than mothers with new
babies. The age of their children did not significantly influence fathers’ marital satisfaction. Marital satisfaction declined more sharply among parents with higher socioeconomic status; the authors noted these participants would be more likely to feel their freedom had been restricted. Twenge and her colleagues (2003) found satisfaction decline was greater among participants in studies published more recently and suggested as couples’ ideals are becoming more egalitarian, these couples may be more likely to experience role conflict as “traditional” parenting roles tend to emerge. Parents with more children described lower marital satisfaction compared to parents with fewer children. However, the most significant difference in satisfaction was found between parents and non-parents, leading Twenge and her associates to conclude marital satisfaction is most strongly impacted by simply becoming a parent.

A recent longitudinal study (Van Egeren, 2004) of 101 married couples transitioning to parenthood found a decline in marital satisfaction for mothers, but revealed relatively stable and satisfactory coparenting experiences for both mothers and fathers. Calling attention to the fact the coparenting relationship only begins at the baby’s birth, Van Egeren suggested the marital relationship, with its previously set patterns and processes, may be negatively impacted by the unbalancing impact of adding a baby to the family. Of particular interest, however, was her finding that changes in couples’ marriages were negatively correlated with changes in their coparenting experiences. She noted:

These findings promote speculation that parenthood is incorporated into the couple subsystem by maintaining one aspect of the relationship at the expense of the other. This suggests that parents could experience a more cooperative coparenting relationship, but the cost might be less intimacy as a couple. Conversely, parents may place a priority on maintaining the quality of the pre-birth marital relationship, but request less support from the spouse in the parenting realm; in this case, a
possible outcome would be more discrepant individual parent–child involvement, most likely with mothers expending greater effort in parenting than fathers. The present study provided some indication that this was indeed the case. (p. 473)

In a longitudinal study of 50 married couples assessed both during pregnancy and 4 months postpartum, Hackel and Ruble (1992) noted a “declining salience” (p. 955) of the relationship to the couple transitioning to parenthood, paired with less satisfaction and more traditional gender roles than either partner had expected. These same findings were reported by Cowan and Cowan (1988, 2000) in their Becoming a Family project, in which they surveyed and interviewed 72 couples during the mothers’ pregnancies and when the infants were 6 and 18 months old. Both men and women in Cowan and Cowan’s research indicated their romantic relationship took a “back burner” to the various other roles in which they now participated. Mothers and fathers reported parenthood became their most salient role; however, mothers described parenthood as taking up more than twice the amount of time and energy compared to fathers’ descriptions of parenthood (Cowan & Cowan, 2000). Men also have reported declines in their sexual relationship (Condon et al., 2004).

Though women describe declining marital satisfaction and relevance of their romantic relationships, they also report increased dependency on their relationships with their husbands. Fox (2001) described this phenomenon in her analysis of a qualitative study of 40 couples who she interviewed during the mothers’ pregnancies, and at 2 months and at 1 year postpartum. She noted women’s increased dependence on their husbands reflected greater economic dependence, as well as greater emotional dependence. She found the transition to parenthood often isolated women from their work and social support networks, and the women in the study also felt the support of
their partners was critical to their ability to parent their children. Along with increased dependency emerged increased use of avoidance strategies in conflict interactions.

**Increased marital conflict**

The transition to parenthood is associated with an increase in conflict among partners, which may at least in part explain the decrease in marital satisfaction typically found among new parents. In fact, in one study of 47 couples who were new parents, this reported increase in conflict was the only variable in the study associated with women’s declining marital satisfaction and was one of only two variables associated with men’s declining marital satisfaction (Cowan et al., 1985). Despite the strong link between increased conflict and decreased marital satisfaction among new parents, surprisingly little research has focused on couples’ conflict behaviors associated with the transition to parenthood. Still, the extant research does illuminate some interesting trends.

Raush and his associates (1974) found few changes in couples’ conflict behaviors across the transition to parenthood. In a study of 13 married couples transitioning to parenthood and 13 non-pregnant couples who were matched on length of marriage, few differences were found in conflict behavior that could be attributed to the transition to parenthood. Rather, length of marriage seemed to change couples’ approaches to conflict, with all of the participants demonstrating decreased acts of rejection toward their spouse and increased use of rational problem-solving. Cowan and Cowan (1988) similarly found new parents reported resolving conflicts more rationally and efficiently than they had before becoming parents, perhaps due to the lessened time available for conflict; because this data came from interviews with parents, it cannot be determined whether these perceived changes were reflected in actual behavior and were in fact attributable to the transition to parenthood or length of marriage.
Raush and his associates (1974) did detect one change attributable to the transition to parenthood, finding husbands increased their reconciliation attempts when their wives were pregnant, but that this behavior declined again after the birth of the baby. Noting the difficulties many women experience after the arrival of their baby, the researchers concluded about this discovery of husbands’ conflict behavior that “apparently they no longer see their wives as needing special support when engaged in marital conflict. If this finding reflects their actual practice at home, these husbands may be failing their wives just when support is most needed” (pp. 190-191).

In contrast to the relative stability of couples’ conflict behaviors evidenced in the study by Rausch and his colleagues, Lewis (1989) found some couples regressed or improved in functioning while others remained stable as they became parents. In this study, he charted the course of “family competence” over the transition to parenthood through surveying, interviewing, and observing 38 couples from pregnancy to 1 year postpartum. Lewis defined family competence as “the extent to which a family accomplishes two cardinal tasks: producing psychologically healthy children who can function autonomously and enter into enduring relationships outside the family, and stabilizing the parents’ personalities while facilitating their continuing development” (pp. 2-3). Although only one piece of family competence, Lewis examined how families manage conflict. Among his sample of new parents, he was able to identify four different types of families on a “continuum of family competence” (p. 3). “Highly competent” couples were characterized by high levels of intimacy, commitment, and expressiveness, as well as by shared power and authoritative parenting practices. “Competent but pained” couples experienced more conflict and a demand/withdraw pattern of conflict in their
relationships; they also were less expressive, had less intimacy, and had varying degrees of shared power. “Dominant-submissive” couples were characterized by an imbalance in power, low expressiveness, low intimacy, and high commitment. “Conflicted” couples were locked in power struggles and had high degrees of conflict but poor conflict-resolution skills; these couples had low levels of expressiveness, intimacy, and commitment, and were more likely to use manipulation. Across the transition to parenthood, most of the “highly competent couples” and the “dominant-submissive” couples remained fairly stable. The “competent but pained” couples tended to regress in functioning, developing a greater imbalance of power, increasing distance, and having more frequent and intense conflict. The “conflicted” couples demonstrated the most variability, with some couples functioning better after having a child, some remaining stable, and some regressing. In summary, depending on couples’ levels of family competence before the birth of their babies, conflict resolution skills could improve, deteriorate, or remain unchanged.

A study of 40 married couples expecting their first child also tracked relational patterns across the transition to parenthood, including patterns of conflict resolution (Heinicke & Guthrie, 1996). Couples in this study were interviewed separately during the women’s pregnancies, and also participated in a joint conflict resolution task before the birth of the baby; the researchers used this data to categorize the couples’ marital interaction and their approach to conflict resolution. Post-birth marital adaptation was determined through interviews with only the wives, representing a limitation of this study. The majority of couples (although not all) who were able to come to a resolution of the conflicts discussed prior to the babies’ arrival remained consistently high
functioning over the transition to parenthood or increased their functioning. These couples included those who had confronted the conflict and reached resolution through discussion and agreement, as well as those who had expressed negative and critical affect during the task. The majority of couples (although not all) who did not resolve the conflicts during the task stayed consistently low functioning or decreased their functioning after they had a child. This group included couples who tended to withdraw from the conflict, as well as those who expressed negative and critical affect but did not reach a resolution.

Research by Paley and her associates (2005) discovered a similar distinction between constructive and destructive conflict among new parents. Their longitudinal study of 138 couples transitioning to parenthood examined the interaction between parents’ attachment style and conflict behaviors, and their subsequent influence on family interactions. Couples completed marital problem-solving tasks over four assessments, during the mother’s pregnancy and when the couple’s baby was 3 months, 12 months, and 24 months old. The parents and their child also completed a family interaction play task at the 24 month assessment. The researchers found conflict engagement (even seemingly negative engagement) was more favorable than conflict avoidance. Parents’ withdrawal during conflict predicted less positive family interactions than did negative escalation during conflict. However, this pattern was dependent on whether the husbands had secure or insecure attachment patterns. Family interactions were more negative when fathers with insecure attachments were in marriages where negative escalation of conflict occurred. In contrast, negative escalation of conflict for couples including a husband with a secure attachment did not detract from the quality of family interactions. In fact, the
family interactions of these securely-attached fathers were more positive when the couple’s conflict resolution included a *higher* level of negative escalation, as measured before their child’s birth. The authors suggested negative escalation may be harmful to insecurely attached fathers while it may prompt securely-attached fathers to make changes improving their relationships with their wives and children.

These findings of conflict engagement (including seemingly negative engagement) generally producing better outcomes compared to conflict avoidance are particularly noteworthy since researchers have observed the transition to parenthood is associated with increased use of avoidance strategies in regulating conflict (Belsky & Kelly, 1994; Crohan, 1996; Fox, 2001). Kluwer (1997) reported that the expectant parents in her study were more likely to try to avoid conflict despite discontent with the division of labor when the couples held more “traditional” gender role ideologies. Fox (2001) noted because mothers felt dependent on their partners for support, they often avoided conflict that might interrupt that support. In this way, they prioritized harmony in their marriages over resolution of various problems. A study of 38 White couples and 27 African-American couples who had been married 1 to 3 years and had become parents found in the short-term, passive avoidance of conflict (defined as “becoming quiet and pulling away” during conflict) was associated with higher marital satisfaction; active avoidance of conflict (defined as leaving the scene of the conflict to “cool down”) was associated with lower marital satisfaction (Crohan, 1996). Heinicke and Guthrie’s (1996) study, described above, suggests withdrawing from conflict is associated with poorer marital adaptation across the transition to parenthood, whereas intense negative affect was associated with positive outcomes among some couples and negative outcomes among
others (depending on whether a resolution to the conflict was reached). Kluwer (1997) ascertained with her sample of expectant couples that mutual avoidance of conflict was associated with negative conflict outcomes. Similarly, Belsky and Kelly’s (1994) research with 250 couples who were interviewed, surveyed, and observed from late in pregnancy to 3 years postpartum found consistently using avoidance as a conflict strategy led to greater difficulty managing the transition to parenthood. Belsky and Kelly noted conflict-avoidant couples previously had maintained connection by sharing activities rather than sharing emotions; because mothers’ and fathers’ activities tend to sharply diverge, new parents who avoid conflict may also sacrifice intimacy.

Along with changes in couples’ relationships and approaches to conflict, it is important to note specific areas of conflict. While a study of 494 Dutch couples expecting their first child found women more commonly expressed discontent with the couples’ division of household labor than did their partners (Kluwer et al., 1997), Cowan and her associates (1985) noted both new mothers and fathers rated issues concerning the division of labor as the primary topic of their conflicts. Cowan and Cowan (1985, 1988, 2000) found role differentiation in the division of labor along with other incidents splitting men and women’s experiences rather than encouraging mutuality to be associated with increased conflict and reduced satisfaction with the relationship. At the same time, they stated “above and beyond issues of equity and fairness in the actual division, partners’ satisfaction was related to whether and how family tasks were discussed” (P. A. Cowan & Cowan, 1988, p. 131). Couples who share household and parenting responsibilities are far from immune from conflict. Fox (2001) noted several of the couples in her study who conflicted over the division of housework had relatively egalitarian divisions of labor.
Goodnow (1998) described the rule of “one up, both up” developed by egalitarian couples in her study which stipulated that when one partner was working on household chores, the other should be as well; when this rule was violated by one partner relaxing as the other worked, conflict ensued.

In Kluwer’s (1997) study of expectant parents, she found women’s discontent with the division of household labor was frequently associated with the wife-demand/husband-withdraw conflict pattern, and that this pattern was strengthened when the husbands were relatively content with the division of labor; this demand/withdraw pattern was associated with negative conflict outcomes. When both partners were discontent with their division of household labor, mutual blame and criticism characterized their conflict behavior and was also associated with negative conflict outcomes. Kluwer concluded discontent with the division of labor was either not associated or was negatively associated with constructive conflict strategies.

Parenting Roles, the Division of Labor, and Violated Expectations

It may be unsurprising couples’ primary topic of conflict during the transition to parenthood is their division of labor. The roles new parents develop and carry out in their emerging families are intertwined with their satisfaction in marriage. Yet the strength and direction of this relationship varies between mothers and fathers. For husbands, the quality of their marriage both before and after becoming a parent predicts the level and quality of their involvement with their infants (Belsky & Kelly, 1994; Paley et al., 2005; Shapiro, 2005; Van Egeren, 2004). For wives, fathers’ involvement in the practical and emotional aspects of child care and also fathers’ completion of housework predicts marital satisfaction, especially when their husbands’ involvement matches the expectations wives previously held (C. P. Cowan & Cowan, 1988; Cowan & Cowan,
Therefore, a closer examination of parenting roles and the differences that emerge in these roles for mothers and fathers is warranted.

The Influence of Gender on Parenting Roles

As noted above, couples experience many challenges upon the transition to parenthood. These challenges are often highly influenced by gender, and therefore the purpose of this section is to detail how gender influences parenting roles. Defining gender is an important first step in this examination: It is “more than an individual characteristic of females and males, and more than a role assumed by or assigned to women and men. Gender in families includes structural constraints and opportunities, beliefs and ideology, actual arrangements and activities, meanings and experiences, diversity and change, and interaction and relation” (Thompson & Walker, 1989, pp. 845-846). These aspects of how gender works in families are particularly relevant when considering issues of equality and fairness in the development of parenting roles.

As has been described in the literature, couples who had relatively egalitarian relationships prior to the birth of their child typically find themselves in “traditional” roles highly influenced by stereotypical notions of gender once they become parents (Cowan & Cowan, 2000; Crohan, 1996; Fox, 2001; Hackel & Ruble, 1992; Hock, Schirtzinger, Lutz, & Widaman, 1995; Ruble et al., 1988; Steil, 1997; Thompson & Walker, 1989; Walzer, 1996). As couples’ roles and experiences become more divided along these traditional gender lines, couples may feel a decreased sense of intimacy as well as decreased satisfaction in their relationship (Cowan & Cowan, 2000; Cowan et al., 1985; Hackel & Ruble, 1992; Hock et al., 1995; Lewis, 1989); past commonalities may be overshadowed by the current focus on different domains, and men and women may
resent the restricted roles into which they have fallen or have been forced. This pattern has far-reaching practical, psychological, relational, and cultural consequences.

Researchers have long examined the division of labor in marriage. The transition to parenthood seems a particularly relevant area of inquiry as it often represents a catalyst setting off the development of gender-stereotyped parenting roles and divisions of labor. Therefore, research on this transition and on the division of labor in marriage may be mutually informing and relevant. A landmark finding regarding the division of labor was Hochschild’s (1989) description of the “second shift” women in families perform. After analyzing qualitative data from interviews of 50 couples and observations of 12 households, she noted women continue to do the vast majority of housework and child care, despite increased participation in the workforce. Women not only sacrifice the time and effort required to complete these tasks, but must also grapple with the fact that domestic labor is usually unrecognized, unappreciated, and devalued (Ferree, 1990; Thompson & Walker, 1989). When men do increase their contribution to domestic labor, it is usually in child care, not housework (Hawkins & Roberts, 1992; Thompson & Walker, 1989). Men are rarely expected to care for their children and complete housework concurrently, a situation quite different from their wives (Fox, 2001). In their literature review, Thompson and Walker (1989) noted men often “contribute more to the need for household work than they contribute to its completion” (p. 854). Although some assistance with child care is preferable to no help at all, Hawkins and Roberts (1992) argued child care and housework are inherently interconnected. They provided the example of a father giving his child a bath, recognizing that the bathtub must be cleaned by someone before this task can be completed. Women still are largely responsible for
the “behind-the-scenes” housework that must be done. Hawkins and Roberts also noted when men participate in household chores, they usually choose which tasks to complete. The authors contended this arrangement cannot be truly equitable as women are likely to be left with the most tedious and undesirable tasks. While men may opt out of child care and housework for various reasons (such as inability or disinterest), women cannot use these same justifications to avoid domestic work (Allen & Hawkins, 1999; LaRossa & LaRossa, 1981; McKee, 1982).

Besides doing most of the physical housekeeping and caregiving in the family, mothers are also responsible for delegating and managing household tasks. In a qualitative study of 25 couples, fathers more often completed household tasks after they had been told to do so (Walzer, 1996). While women are usually “responsible” for child care, men are more likely to “help out” or care for children financially (Thompson & Walker, 1989), such that a “manager-helper” (Allen & Hawkins, 1999, p. 203) relationship often emerges. Thompson and Walker stated “Mothers, regardless of whether they are employed, carry 90% of the burden of responsibility for child care: they plan, organize, delegate, supervise, and schedule” (p. 856). Doucet’s (2001) qualitative study illustrates this point through interviews with 23 couples who self-identified as consciously trying to share domestic responsibilities, and who had children ranging in ages from 1 year to 25 years: Women tended to be the ones to make doctors’ appointments, arrange for babysitting, ask their partners to complete household tasks, and to build relationships with schools and others in the community. Walzer (1996) noted couples may perceive women’s greater responsibilities for “mental labor” (p. 219) as being part of the naturalness of mothering because “habitual patterns become perceived
as making sense – doing becomes a kind of knowing... – just as being the one to read the book makes the mother the expert” (p. 227). Focusing on child care, Walzer (1996) argued women complete these types of mental labor because they recognize “worrying gets things done for the baby. If the father offered to share the worrying rather than telling the mother to stop, the outcome might be quite different” (p. 224). She perceived “mothers worry about babies, in part, because fathers do not” (p. 221). Importantly, this emotion work rather than the physical caretaking of home and family has been linked with mothers’ experiences of depression during their children’s early years (Strazdins, Galligan, & Scannell, 1997).

These unbalanced responsibilities are far different from what both men and women expect their roles to be like upon transitioning to parenthood. In fact, one study found the majority of husbands and wives felt the responsibility for housework should be shared equally between partners, and an overwhelming 80% expressed that child care should also be egalitarian (Hiller & Philliber, 1986). In another study (Ruble et al., 1988), this discrepancy between expectations and actual arrangements was illustrated with a cross-sectional sample of 670 women (whose status in the transition to parenthood ranged from early pregnancy to 3 months postpartum) and a longitudinal sample of 48 women (who were assessed during pregnancy and at 3 months postpartum). In this study, the majority of pregnant women in the sample expected to share child care equally or to do somewhat more than fathers, while only 12% of women in the cross-sectional sample and 17% of women in the longitudinal sample expected to do much more than their partners; in reality, 40% of these women said they were doing more child care than their husbands
and over 40% reported they were doing much more child care than their husbands after the birth of their babies.

A later study (Cook et al., 2005) followed 68 couples across the transition to parenthood, assessing partners’ expectations for and actual involvement of the fathers. Fathers expected to be more involved with child care than the mothers expected the fathers to be; both parents reported the fathers’ involvement to be lower than they had expected. Similarly, Van Egeren’s (2004) study of 101 couples transitioning to parenthood also found mothers had greater responsibility for child care than they expected while fathers had less. In this investigation, the magnitude of violated expectations were greatest at 1 month, and lessened (though were still present) at 3 and 6 months. These trends illustrate the belief men should be involved in child care, but the majority are not (Thompson & Walker, 1989). In turn, “most middle-class mothers believe that parenting squelched whatever marital equality they had managed before children” (Thompson & Walker, 1989, p. 863). Even more than the actual division of labor, these “violated expectations” have profound effects on women’s well-being and marital satisfaction (Cowan & Cowan, 2000; Goldberg & Perry-Jenkins, 2004; Hackel & Ruble, 1992; Kalmuss, Davidson, & Cushman, 1992; Pancer & Pratt, 2000; Ruble et al., 1988).

Some authors have been surprised by women’s expectations for their partners’ fairly equal involvement in child care and housework, given the reality of fathers’ lesser degree of participation (Ruble et al., 1988). Yet both mothers’ and fathers’ expectations do seem linked to fathers’ actual involvement. As described above, in Cook and his colleagues’ (2005) study, both mothers and fathers expected higher participation in child
care from fathers than what actually occurred. However, mothers’ expectations for fathers’ practical care giving for their child did predict fathers’ involvement in these tasks. Fathers’ expectations for their own involvement in practical and emotional care-giving, though higher than the level of participation that actually occurred, also predicted more involvement. The only negative correlation occurred for mothers’ expectations for fathers’ involvement in emotional care of the baby, where their higher expectations were associated with fathers’ lower participation in these tasks.

Most of the research has implied violated expectations occur when mothers do more than they had expected. However, violated expectations are mediated by gender role traditionality and by socioeconomic status. Women with more traditional gender roles experienced increased well-being and marital satisfaction if they were doing more domestic work than they had expected; this situation may have affirmed their preferred roles (Hackel & Ruble, 1992). Similarly, women with traditional gender roles who were doing less domestic work than they anticipated reported increased depression (Goldberg & Perry-Jenkins, 2004). Goldberg and Perry-Jenkins (2004) interviewed 97 couples who they followed from pregnancy to the time the mothers returned to work (which was about 15 weeks postpartum on average), and discovered:

if women do not wish to give up control of the domestic sphere, being forced to share child care and housework may have deleterious effects on their well-being. Thus, increased distress among traditional women may constitute evidence that if women are employed but believe women should be home with their children, their mental health will suffer. (p. 234)

These results from Goldberg and Perry-Jenkins’ research were obtained among working-class participants; caring for their families and homes may be particularly important and fulfilling to underprivileged women who receive less power and status from paid employment (Allen & Hawkins, 1999; hooks, 2000). Women with more egalitarian
ideals, a growing population, experience more depression and less marital satisfaction when they do more domestic labor than they had anticipated (Cowan & Cowan, 2000; Hackel & Ruble, 1992; Hock et al., 1995; Kalmuss et al., 1992; Ruble et al., 1988).

Although many parents expect a more egalitarian division of labor than they actually form after the birth of their first child and mothers especially often are disappointed and frustrated by this result, most men and women do not perceive an unequal distribution of labor as unjust. Mikula (1998) found across several studies, only about 20 to 30% of participants felt an unequal distribution of housework was a “little or somewhat unfair,” while a number approximating zero saw it as “very unjust” (p. 218). Mikula also detailed many of the explanations theorists and researchers have developed for these findings. Women may perceive a lack of alternatives to the unequal distribution of labor. Their lesser power may lead them to hold lower expectations for fairness. Men’s lack of participation may be perceived as offset by their greater earning power. Women may also see housework as symbolic of loving and nurturing, and may be satisfied with simply being appreciated for their contributions. Indeed, a study of 234 married women working outside the home demonstrated women’s feeling appreciated most strongly predicted a sense of fairness about the division of labor (Hawkins, Marshall, & Meiners, 1995). Lastly, domestic tasks may be defined by family members as “feminine.” Goodnow (1998) noted “ownership” (p. 361) of a task determines fairness, and family members are seen as “owning tasks that arise in their ‘own space,’ tasks that were ‘assigned to them in the first place,’ or tasks thought to be theirs by virtue of gender or status” (p. 370). If men and women perceive child care and housework as tasks owned by women, both may perceive an unequal distribution of household labor as fair.
Mikula (1998) offered a “distributive justice framework” based on work by Thompson (1991) and Major (1993) as a particularly thorough explanation for the perceived fairness of unequal distributions of labor. The primary contention of this framework is that an unfair division of labor does not violate women’s sense of entitlement. Mikula explained entitlement is based on “outcome values, comparison referents, and justifications” (p. 220). Because women experience positive as well as negative outcomes from an unequal division of labor and tend to engage in same-sex rather than cross-sex comparisons, and because men and women develop justifications and excuses for having an unequal distribution of labor, women may not feel entitled to having an equal distribution of labor. Mikula observed women’s sense of fairness about their division of labor was more strongly associated with their marital satisfaction and individual well-being than was their actual division of labor.

The results of a longitudinal study of couples transitioning to parenthood suggest a complex relationship between actual inequities, perceived unfairness, and marital satisfaction. Grote and Clark (2001) found for some couples, unequal distributions of labor were not perceived as unfair until after the marriage had become distressed; the authors suggested the dissatisfaction with the marriage may have led spouses to examine their own and their partners’ contributions and to notice the inequities present. For other couples, perceived unfairness predicted later dissatisfaction with the marriage; since perceived unfairness increased among couples as they progressed through their baby’s first year, this finding suggests marital distress only resulted after inequities had reached a critical point. Although fathers’ reports of unfairness reflected their beliefs the division
of labor was unbalanced in their favor, perceived unfairness was linked with marital
dissatisfaction and conflict for both husbands and wives.

Even though couples seem disinclined to associate inequities with a sense of
unfairness, in a study of 190 new parents, most of the men and women chose an equal
division of labor as the most just of several different household arrangements; this
finding held true despite the fact few of these participants actually had equal divisions of
labor in their own homes (Reichle & Gefke, 1998). In this same study, 75% of the
participants responded they perceived division of labor issues as matters of justice.
Additionally, despite women’s lack of feeling entitled to shared divisions of labor,
Goodnow (1998) found “perceptions of fairness are correlated with the extent to which
men take a share of traditionally ‘female’ tasks” (p. 360), and suggested this sense of
fairness may be tied to women’s perceptions of their partners as flexible and appreciative
of the household work they as women routinely do. What all of this points to is the
underlying preference for shared divisions of labor by many couples, and the difficulty
(due to justifications and other processes) of changing patterns of household work once
they are established.

The Development of Gendered Parenting Roles

Although we have seen couples often form an unequal division of household labor
upon transitioning to parenthood and have examined some of the processes maintaining
this distribution, it may be helpful to examine how and why couples develop gendered
divisions of labor. Couples receive gendered notions of parenthood from numerous
sources. Risman (1998) discusses three interdependent structural levels influencing
gendered beliefs and behavior: the individual level, the societal or cultural level, and the
interactional level. A brief overview of these levels and their application to gendered
experiences of parenthood further details challenges to equally shared parenting practices.

From an individual level of analysis, inequality between roles fulfilled by mothers and fathers can be understood as a product of gender role socialization occurring in childhood (Risman, 1998). Much research exists detailing different expectations held for boys and girls. Girls tend to be socialized into caretaking roles, while boys usually are not. Little girls receive baby-dolls from their families, while parents give little boys trucks. Teenage girls may be expected to baby-sit to earn spending money, while teenage boys may be expected to mow lawns or work on odd jobs. In families, girls are given more housekeeping chores than boys (Ferree, 1990). Many families expect girls to grow up to become full-time wives and mothers, or expect their boys will hold higher-status jobs than their girls when they reach adulthood (Eccles, Freedman-Doan, Frome, Jacobs, & Yoon, 2000). Children growing up in two-parent families usually see women as primary caretakers and housekeepers (regardless of their employment status) and men as primary breadwinners. Children come to see the roles of mother and father as being quite different, and involving skills and values that are highly differentiated according to gender. Yet parents may not socialize children into gender roles simply because they themselves were socialized into these roles; parents may socialize their children into gender roles because they perceive their children will experience negative consequences on a societal and cultural level if they do not (Ferree, 1990).

Societal factors also contribute to differences in the meaning of motherhood and fatherhood. Cultural expectations exist in which women are assumed to be primarily responsible for child rearing. Walzer (1996) noted books on parenting are written for
women, reinforcing the cultural expectation that it is women’s responsibility to be well versed in parenting skills, not men’s. One need only watch a few minutes of television to see women cooking for their children, bandaging children’s scraped knees, and laundering children’s muddy clothes; while gradually increasing in frequency, similar media images still rarely exist for fathers. Fathers are often portrayed as going to or coming from work, as if providing financially for one’s family is the primary responsibility of fatherhood. Walzer (1996) also observed that mothers perceive others in society judging them on how good of mothers they are, while their male partners do not receive such scrutiny.

Other societal factors and institutional barriers also contribute to highly gendered parenthood roles. Although mothers are entering the workforce at record rates, less than half of married mothers are employed full-time in the labor force, while approximately 19% are employed part-time and one third do not work outside the home (United States Department of Labor, 2005c). For married mothers with a child under three years of age, approximately 35% are employed full-time, 17% are employed part-time, and 47% do not work outside the home (United States Department of Labor, 2005b). Labor force participation rates of mothers with infants under age one has declined 3% since its most recent peak in 2002 (United States Department of Labor, 2005a). Many employers require long hours or inflexible schedules which can create significant barriers for working parents (Ferree, 1990). Because mothers tend to be held responsible for child care and because they receive less pay for their work, they are often “pushed out” of full-time employment (Cowan & Cowan, 2000; Risman, 1998). Quality child care can be
difficult to find and afford, and women’s (but not often men’s) well-being and ability to work is affected by the quality of child care available (Steil, 1997).

Because men have greater access to work, are not held responsible for child care, and have the support of their partners, couples often place primary accountability for the family’s financial welfare on fathers who in turn can feel burdened by this responsibility. Yet the more hours fathers work, the less practically and emotionally involved they are with their infants (Cook et al., 2005). Especially among families of middle to high socioeconomic status, these societal barriers contribute to parental arrangements where men are responsible for financial provision and women are responsible for housework and child care. In Fox’s (2001) qualitative study of 40 couples interviewed throughout the transition to parenthood and in Feldman’s (2000) survey and observational study of 60 Israeli couples and their infants, women continued to be the primary caregivers in their families even after they returned to full-time paid employment.

Work-family policies, designed to ease parents’ balancing of responsibilities, may have little to no effect on the inequalities of couples’ divisions of labor and in some cases may contribute to less equal arrangements. Singley and Hynes (2005) interviewed 18 married couples with young children, where both partners had been employed prior to the mother’s pregnancy. The researchers found the couples to represent two groups, one which was committed to “traditional” gender roles and one which was not. The “traditional” couples largely did not make use of policies allowing greater father involvement because it was not seen as necessary. The nontraditional couples based their work-family choices on what was most practical; since the husbands generally had higher incomes, almost all of these couples used the men’s vacation and sick leave (which was
paid) for a week or two, but did not make use of more extended family leave for the fathers (which would be unpaid). Since the mothers generally earned less and had access to more flexible choices (such as longer leaves of absence, working part-time, working from home, or quitting their jobs), these families decided the mother was in the best position for primary care giving. Although couples’ ideologies about gender roles varied, work-family policies and institutional barriers (such as earning potential) contributed to highly gender-differentiated divisions of child care.

Subtle inequality at the interactional level of analysis can be especially influential in couples’ gendered roles as parents, and yet this often remains invisible. Risman (1998) described this phenomenon:

The gender stratification crisis in egalitarian couples can usually be traced to the assigning of parental duties....At the birth of the first child the male is quickly constrained to be a “good provider.” He is considered solely responsible for the economic well-being of this fragile new person. No matter how involved a new father becomes in child care he almost never considers less than full-time employment....In fact, men are expected to work harder and are constrained from leaving less than optimal jobs because of their economic responsibilities. When they do care for their children after work they are praised highly by friends, family members, and wives as wonderful, modern, “involved” fathers. A married professional woman faces a quite different set of reactions at the birth of the first child. Her domestic women friends and perhaps even her own family members may suggest she is a selfish feminist who puts herself before her own child’s welfare....Although the wife provides at least as much care as her husband, he is praised and she is damned. The couple themselves begins to think of him as a terrific father and of her as a reasonable if somewhat selfish mother. His self-esteem is high, and she feels lucky to have such a husband, given the alternatives. (pp. 39-40)

Risman detailed how these dynamics can further influence relationship choices. Pressure on men to provide for their families and pressure on women to be full-time caretakers of their children often result in men working longer hours at less satisfying jobs and women sacrificing their careers to take care of children. Walzer (1996) found that men and women also co-construct gendered meanings of parenting in which motherhood means
complete self-sacrifice and availability to children, and fatherhood means economic provision and “helping” mothers with child care.

Also at the interactional level, “gatekeeping” may contribute to gendered divisions of labor. A survey of 622 married mothers employed in the paid workforce revealed low paternal involvement reported in families in which mothers set rigid standards for how domestic labor should be completed, attained satisfaction and validation from completing housework and child care, and held beliefs that men have less enjoyment of and less skill at completing domestic tasks (Allen & Hawkins, 1999). While this study focused solely on mothers’ influence on fathers’ involvement, the authors suggested both mothers and fathers can become invested in maintaining an unequal division of labor. This situation allows men the time and energy to pursue other interests; at the same time, it provides women with an arena “in which they may feel irreplaceable and can exercise significant autonomy and power” (Allen & Hawkins, 1999, p. 202) in contrast to the lack of power and status they may achieve in the workforce. Cultural stereotypes about fathers’ selfishness and lack of skill further polarize parents’ completion of household tasks.

Allen and Hawkins (1999) noted: “Mothers may feel they need to manage or oversee their husbands’ participation in housework and child care because fathers can’t do it ‘right’ without supervision from someone more competent and responsible” (p. 202). The authors continued:

Mothers also may redo tasks, set unbending standards for family work, or criticize their husbands’ work to protect their own authority in the home. Fathers also may collude or act in ways that support maternal gatekeeping to maintain gender specialization in family work. Men may choose to do less frequently performed tasks, outwait their partner, ask many questions about the task, do the task poorly, or plead ineptness. (p. 203)
Gatekeeping may also take the form of mothers encouraging and structuring fathers’ involvement in child care. Mothers may delegate tasks to fathers in an effort to increase their participation, and make efforts for interactions between fathers and children to be successful (such as making sure the baby has been fed and has a clean diaper before the father cares for the child) (Fox, 2001). Because they are prioritizing fathers’ abilities to spend time with their infants rather than fathers’ completion of household tasks, mothers may also be willing to complete more housework (Fox, 2001).

The term “maternal gatekeeping” implies mothers’ actions determine parental roles, and subtly places blame on women for the gendered division of labor that arises. Yet interactional processes are recursive, with no one partner being solely responsible for the outcome. Just as couples’ interactions determine fathers’ involvement with their children, partners also mutually guide mothers’ involvement. Fox (2001) pointed out that “caring for a child is a profoundly relational activity” (p. 375). She explored this recursion in her qualitative study as she examined the concept of “intensive mothering” (p. 379). Fox noted many of the women in her study wanted to place their infants’ needs above their own and their partners’ needs. However, mothers’ ability to do so was dependent on fathers’ “agreement not to expect to receive any attention to their own needs, at least, and even to ‘help out’” (p. 380). Some of the men in the study were supportive of their wives’ preferred parenting role, and the wives in turn received power and appreciation in their marriage, though they carried the primary responsibility for child care. Other men were more resentful about their wives’ involvement with the babies, but were supportive enough that the women could continue intensive mothering. Lastly, some fathers would not consent to their wives’ preferred role, and made demands on their partners’ time and
energy that did not allow the mothers to be as involved with their infants. Consequently, the wives of these men changed their own definitions of their babies’ needs so they were less in conflict with their husbands’ wishes.

These combined processes and the unequal distribution of labor have profound consequences for women and men, their children, and their relationships. Ruble and her associates (1988) noted the “division of labor seems to be particularly important to wives, for whom feelings of well-being and depression are related to husbands’ participation in household chores” (p. 78). Researchers assert women experience mental health benefits when household labor is shared with their partners (Cowan & Cowan, 2000; Hawkins & Roberts, 1992). Yet in one study of 802 parents of young children, women reported more symptoms of depression when their partners contributed more to child care; the authors suggested this finding could be reflective of the women’s preference for traditional roles, or could indicate that the process of encouraging their partners to care for their child could be stressful itself (Blair & Hardesty, 1994). In contrast, the same study found women experienced less depression when their partners performed a significant portion of the child care, such that this balance seemed more helpful to women than the overall amount of child care their partners provided. Perceptions of fairness may be especially relevant in this area, as in this study and others, women who believe their division of labor is unfair have been found to have more depressive symptoms and worse physical health than women who see it as fair (Blair & Hardesty, 1994; Cowan & Cowan, 2000; Lennon & Rosenfield, 1994; Robinson & Spitze, 1992).

Hawkins and Roberts (1992) suggested men experience both positive and negative consequences when they share in household labor. Especially at first, men may
experience decreases in self-esteem. As they become more involved in child care and housework, they may experience more conflict in their marriages and have lower marital satisfaction. They may also perceive some degree of stigmatization at work for being more involved with their children. One study found men experience more depression when they contribute more to housework (Blair & Hardesty, 1994). However, when men share in household labor, they perceive increased intimacy with their partners and their children (Feldman, 2000; Hawkins & Roberts, 1992). Another study found men’s involvement in emotion work in the family was not linked with depression, in contrast to women’s experiences (Strazdins et al., 1997). Gottman’s (1994) research suggested husbands’ completion of housework was positively correlated with constructive approaches to conflict and was negatively correlated with loneliness and illness. Feldman (2000) found that men’s “taking part in the mundane activities of house and childcare serves not only a supporting role for women but also promotes men’s sensitive relations with their infants” (p. 187). Identification with the parental role was found to be the most significant predictor of fathers’ self-esteem (Blair & Hardesty, 1994). Many men describe wanting to be more involved with their children than their own fathers were, and this involvement can provide a great sense of satisfaction. Additionally, men may perceive a new cultural ideal of involved fatherhood, and may feel anxious if they do not fit this model. Fathers involved in household labor may therefore experience less cognitive dissonance (Hawkins & Roberts, 1992). Indeed, fathers who did less of the housework and child care than they had previously expected to do demonstrated higher rates of depression (Strazdins et al., 1997), whereas they experienced coparenting more positively
as their participation in these tasks grew closer to the level they had expected (Van Egeren, 2004).

Unequal distributions of labor may indirectly affect children as well. The division of labor constitutes one of the greatest areas of conflict over the transition to parenthood (Belsky & Kelly, 1994; Cowan & Cowan, 2000; Kluwer et al., 1997). Many researchers have documented spill-over effects of destructive marital conflict on children, often resulting in fathers’ disengagement from their children and mothers’ over-involvement (Belsky & Kelly, 1994; Cox et al., 1999). Hawkins and Roberts (1992) argued, “Children suffer from the lack of parental time and energy brought about by mothers carrying the load of the ‘second shift’ alone” (p.174). Clearly it is in children’s best interest to have more people involved in their care.

Stress and Coping with Unfairness in Parenting Roles

Cowan and Cowan (2003) succinctly noted:

in this culture at this time, the transition to parenthood appears to propel men and women down separate tracks, and the farther apart they become, the greater their disenchantment with their marital relationship. It seems particularly poignant that in the face of these normative changes, there are no services to support families with young children, unless they are experiencing serious enough marital distress or psychopathology to seek help. (p. 437)

The lack of systematic support on a societal level for couples struggling with these challenges raises the question of how couples cope on their own. Besides the everyday difficulties of caring for an infant, these couples must manage several contradictions: conflicts between what they had expected in their relationships and roles and what actually happened, conflicts between the value they place on fairness and the unfairness that usually develops.
Much of the research literature has focused on protective factors present in the couple’s relationship before the birth of their baby that shield them from the stress of the transition to parenthood (Belsky & Kelly, 1994; Cowan & Cowan, 2000; Heinicke & Guthrie, 1996; Shapiro et al., 2000). However, relatively little is known about the ways these couples cope with the stress once it develops and how their styles of coping (especially their patterns of negotiation and conflict interaction) influence the roles they choose, their relationship satisfaction, and their individual well-being. Part of this lack of information may be attributed to a general lack of information about relational coping processes. Traditionally, coping has been viewed in terms of problem-focused coping which seeks to actively address a problem and emotion-focused coping which seeks to minimize the emotional distress a problem can create. This framework was developed for application to individuals, yet the goals of individual and dyadic coping processes often are in conflict in a given situation (Story & Bradbury, 2004). Researchers have made only cursory inquiries into dyadic coping processes on which couples rely.

Story and Bradbury (2004) noted relationship-focused coping may also be either problem-focused or emotion-focused. Based on work by Coyne and Smith (1991), Story and Bradbury argued these forms of dyadic coping may manifest as either conflict engagement (to solve the problem) or conflict avoidance (to minimize the distress caused by the problem). Similarly, Giunta and Compas (1993) identified eight dyadic coping styles based on various combinations and levels of partners’ conflict engagement and avoidance. These researchers found several coping styles were viable. However, wives’ psychological symptoms were predicted by their reliance on conflict avoidance; husbands’ psychological symptoms were predicted by both their own and their wives’
avoidance of conflict. Another framework for dyadic coping detailed three styles of effective coping and three ineffective styles (Bodenmann, Charvoz, Widmer, & Bradbury, 2004). Effective coping involves both problem-focused and emotion-focused strategies as partners jointly cope with common stresses and help each other with individual stresses. Ineffective dyadic coping is characterized by hostility, insincerity, or disinterest.

Because many new parents seek to avoid conflict, these couples may particularly rely on emotion-focused coping strategies in their relationships. Yet little is known about the processes involved in new parents’ dyadic coping or how their coping strategies manifest. A notable exception is a qualitative study of 22 couples who each had two young children, in which Backett (1982) identified 10 “‘coping mechanisms’ to deal with contradictions, dilemmas and problematical elements involved in their mutual development of parental behavior” (p. 63). These coping mechanisms were used when conflicts arose that the couple felt were changeable, as well as when conflicts arose that the couple thought were relatively fixed and perpetual. Several of the coping mechanisms Backett named were relevant to how couples cope with the contradictions concerning the value they place on fairness and the reality of unequal divisions of labor and child care. These contradictions were seen by the participants as problems that were changeable. The coping mechanisms used were “articulation of the problem, practical compensation, phase or stage, myth, the avoidance of disruptive topics, and the use of tactful deception” (p. 65).

The coping mechanism of articulating the problem was primarily used by the couples in Backett’s study as they considered the facts that all of the wives had left work
to be the primary caregivers in the home, almost all of the wives wanted to return to work as soon as possible, and the women reported feeling like they were more affected by marriage and children than were their husbands. These facts contradicted the couples’ stated belief that their relationships should be fair. The couples did not think the women’s situation could be changed at present because of the needs of the children and other constraints, but expressed their belief it would be changing in the future. To cope with this situation, most of the couples simply articulated the problem. Backett noted “It seemed that the respondents felt that as long as both spouses, and especially the husband, reiterated an awareness of the woman’s problems, then the situation was not so potentially disruptive” (p. 68). This coping mechanism also came into play as the couples considered that the fathers were not as involved with their children as they felt they should be. They would articulate the problem and tell each other they were involving the father as much as possible. They emphasized that they talked with each other about the children and that the fathers were involved in making decisions relevant to the children. In this way, passive involvement was not distinguished from active involvement.

A second way the couples coped with the seeming unfairness of the wives’ situation was through practical compensation. In the couples’ daily lives, “many activities were geared towards making the woman feel that she had equal freedom and that the man was both aware of, and making compensations for, any unfairness in their family bargain” (p. 69). One way of doing this was fathers showing a great deal of interest in what the mothers were doing, trying to assure them of its importance. Another way was the men would take over child care for an evening or weekend-day, which would create a sense of fairness for the women. This seemed to be effective in creating a
sense of fairness even though the men were rarely asked to be responsible for the child
care and were not expected to do housework while they were caring for the children,
representing a very different picture from the responsibilities of the women.

The coping mechanism of phase or stage was used when considering the fathers’
lack of active involvement with the children. The couples emphasized that the problem
was temporary and changeable, and was a characteristic of this particular phase or stage
in their family development. The couples stated their beliefs that the fathers would
become more equally involved with the children as the children grew. They suggested
that as the children got older and entered school, they would have less contact with their
mothers, leveling out the parents’ active involvement. They also expressed that the
fathers would be better able to get involved when the children were able to do activities
in which the fathers could participate, because they stated men are not interested in
activities suitable for babies. The expectation that current inequality would be rectified by
men’s increased involvement later seemed to help couples cope with any feelings of
unfairness. The phase or stage coping mechanism was also used when the couples
discussed the wives’ primary responsibility for child care and housework as they
described this imbalance as a temporary characteristic of their current life circumstances.

Myths were used as coping mechanisms when considering that the division of
household labor was unequal. Backett referred to this coping mechanism as myth because
it “required either minimal practical proof, or even no substantive proof at all” (p. 78).
The myths generally took three different forms, with each of the participant couples using
at least one of the three. Couples would express the husband’s capability of doing
household chores, noting he was able to do them before, he was willing to do them,
and/or he could do them if necessary. The fact the husbands were capable led to a sense of fairness even though the husbands were in reality completing very little housework. A second form of the myth was couples’ belief the men were capable of doing household chores but simply weren’t aware of what needed to be done. A third form of the myth involved a belief that a partner did not do an activity because they did not know how. This kept husbands from “opting in” and led wives to “opt out” of certain activities (p. 81).

Similar to what was noted above that couples transitioning to parenthood may use avoidance as a conflict management strategy, avoidance of disruptive topics and tactful deception were used as coping mechanisms by the couples in Backett’s study. Even though the couples stated they valued open communication in their family relationships, avoiding and minimizing conflict were seen as important means to completing daily work and maintaining amiable relationships. As a result, the couples interacted based on their assumptions of each other’s beliefs and motivations, and on communication that was often interrupted and disjointed.

For conflicts couples felt were fairly unchangeable, couples used the following coping mechanisms: “phase or stage, attribution of permanency, the notion of balance, and disapproved expedients” (p. 86). Phase or stage was primarily used in this context to cope with problems involving the children (such as disobedience). Attribution of permanency involved couples’ viewing problems as being related to personality traits. These varied among families, but two attributions about traits common for many of the couples concerned sleeping and waking, and attributions about the amount of patience each person had. Families used the notion of balance idiosyncratically also, but
commonly referred to it regarding differences in each parent’s approach to discipline and other child rearing practices. The coping mechanism of *disapproved expedients* involved couples’ seeing their parental behavior as “theoretically incorrect but defensible, given the prevailing circumstances” (p. 92). This coping strategy was used when parents disapproved of their behavior, but felt it was the best they could do under stress. Backett highlighted the necessity of both partners’ engagement in the various coping strategies, noting partners often disputed a coping mechanism, leading it to be ineffectual. Consequently, she emphasized “the precariousness of the reality being created” (p. 95).

Conclusions

Although the transition to parenthood brings many joys to men and women, it also brings new stresses to couples and impacts their relationships in challenging and often unexpected ways. One purpose of this review was to investigate extant research on key changes new parents experience after having their first baby. Changes women experience seem to be well documented in the research, whereas research on men’s experience is still lacking. However, available research indicates that while no longer considered a crisis, the transition to parenthood is usually stressful for women and men, and for their relationships. Marital satisfaction typically declines after a couple has a child. Couples’ relationships tend to become more “traditional” with marital and parenting roles ascribed by stereotypical gender roles. These practices and the sense of unfairness that often develops have been linked to declining relationship satisfaction and individual well-being.

A second purpose of this review was to understand the interactional processes present in couples’ relationships relevant to the transition to parenthood. However, little research has been conducted in this area. Extant research does show conflict tends to
increase across the transition to parenthood, with the division of labor a primary topic of conflict. Conflict was also found to be highly predictive of new parents’ levels of marital satisfaction. Surprisingly, only a few studies have focused on conflict in new parents’ relationships. Studies focusing on this area have found an increase in conflict avoidance, perhaps with short-term positive effects and long-term negative effects. Qualitative studies have provided the most information on new parents’ interactional processes, indicating that couples mutually construct and reinforce their parental roles. Backett’s (1982) qualitative study perhaps goes furthest in detailing how couples manage conflicts arising around the division of labor. However, her study along with others focusing on conflict tend to detail challenges and difficulties while providing little information on positive approaches.

The extant research on conflict across the transition to parenthood often creates a dichotomy between constructive and destructive conflict, with constructive approaches narrowly defined. Heinicke and Guthrie’s (1996) study as well as the work by Paley and her associates (2005) are promising starts as they suggest different approaches to conflict resolution before the couple has a child can be linked to positive marital outcomes after the transition to parenthood. A broader definition of constructive conflict seems needed to better understand how couples use conflict effectively as they manage the challenges of new parenthood. Because so little is known about the coping strategies couples employ to challenge or accept gendered parenting roles they often perceive as unfair, and because these parenting practices impact both parents and children, further research is essential.
CHAPTER 3
METHODOLGY

Statement of Purpose

The purpose of this study was to investigate the influence of couple conflict type on new parents’ division of labor, role satisfaction, marital disaffection, and individual well-being. Six primary variables were the focus of this study, including (a) the type of couple conflict behavior, (b) the extent to which the couple’s role expectations about parenting formed before the birth of the baby are met, (c) the couple’s division of household labor, specifically the degree of role differentiation present in partners’ completion of household and child care tasks, (d) partners’ level of dissatisfaction with their family roles, (e) partners’ level of marital disaffection, and (f) partners’ level of individual well-being. A cross-sectional survey method was used in this study. In this chapter, the variables relevant to this investigation, sample selection procedures, a description of the sample, data collection procedures, instrumentation, and the study’s hypotheses are described.

Delineation of Relevant Variables

Relationships between several variables were investigated in this study. An overview of each variable is presented here, while a more thorough description of these variables and the instrumentation by which they were measured is found later in this chapter.
Couple Conflict Type

Couple conflict type refers to the typical conflict style a couple employs in their relationship. This variable was measured through a scale recently published by Holman and Jarvis (2003) which was part of the RELATE survey (Holman, Busby, Doxey, Loyer-Carlson, & Klein, 1997). The purpose of the scale is to measure participants’ perception of how often conflicts in their relationship resemble four couple conflict types described by John Gottman (1994): volatile, validating, conflict-avoiding, and hostile. Although Gottman originally described five couple conflict types, he noted the hostile and hostile-detached types may represent different degrees of marital difficulty, and often simply referred to both types as hostile (Holman & Jarvis, 2003). Gottman’s observational data and grouping of couples into the four couple conflict types form the conceptual basis of the scale.

Violated Expectations

As noted in the review of relevant literature, couples develop expectations about their division of labor early in their relationships and particularly during the women’s pregnancies. However, the expectations developed by both men and women that the men will be full participants in housekeeping and caring for their infant are often unmet. Researchers have referred to this occurrence as “violated expectations,” noting the failure to carry out these intentions brings with it negative consequences for couples and particularly for women. Violated expectations in this investigation were conceptualized as the discrepancy between what couples reported they had expected for their division of labor and how they felt they actually shared parenting tasks and housework.
Division of Household Labor: Task Differentiation and Role Dissatisfaction

In this study, couples who recently had their first child reported how they typically share the tasks and responsibilities of running their household. This area, couples’ division of labor, was assessed through Cowan and Cowan’s (Cowan et al., 1978) “Who Does What?” questionnaire. The developers of this instrument conceptualized parents’ household labor as occurring across three different spheres: household and family tasks, family decisions, and child-related tasks. In the present study, the family decisions sphere was not included for assessment; Cowan and Cowan (1988) found family decision making patterns did not change across the transition to parenthood, making the variable less relevant to this study. In each of the spheres described above, the “Who Does What?” assesses three aspects of parents’ division of labor: (a) husbands’ and wives’ overall involvement, (b) the degree to which partners share tasks as compared to the degree to which role differentiation occurs, and (c) their level of role satisfaction with their division of labor. In this study, task differentiation and role dissatisfaction were examined, while overall level of involvement was not included in the analysis. As noted in the review of relevant literature, a balanced division of labor seems more strongly tied to positive outcomes than the overall involvement of partners in family labor (Blair & Hardesty, 1994).

Marital Disaffection

In this investigation, marital strain was assessed by participants’ reports of the absence or presence of marital disaffection and was measured through the Marital Disaffection Scale (MDS, Kersten, 1990). The MDS is designed to measure partners’ feelings toward each other, including the presence or absence of affection, attachment, and intimacy (Kersten, 1990). The author of the MDS noted disaffection is a gradual
process involving the deterioration of caring and attachment in a relationship, perhaps through the accumulation of various disappointments and conflicts (Kayser, 1996). Kersten-Kayser (1996) defines disaffection as a general loss of caring and love, as opposed to dissatisfaction which may reflect discontent with a particular area of the relationship but not necessarily an overall unhappiness with the relationship. Disaffection often occurs more in one partner than another. It is related to thoughts of divorce, but does not correlate strongly with dissolution of the relationship as some people will choose to stay in a relationship even though they no longer love their partner.

**Individual Well-Being**

In addition to marital well-being and strain, the well-being or distress of the individual partners was also assessed in this study. Marital well-being is often strongly associated with individual well-being. Yet, as noted in the literature review, at times partners may perceive processes contributing to their marital well-being as in conflict with processes that contribute to their individual well-being. In some cases, partners may believe they must sacrifice one kind of well-being to attain the other. Therefore, only assessing marital well-being or only assessing individual well-being provides an incomplete picture of the impact of dyadic coping practices in which couples engage (including their conflicts and negotiation, and their arrangement of family roles), as well as the outcomes of these practices. To measure individual well-being, a short-form of the Rand Mental Health Inventory (MHI-5) was used. This measure provides a general indication of individuals’ overall well-being and distress.

**Description of the Population and Sample**

A convenience sample for this study was drawn from the population of first-time parents. The population of new parents in the United States is characterized by diversity
across many traits. In 2004, 4,115,590 infants were born in the United States (Hamilton, Ventura, Martin, & Sutton, 2005). In 2003, women’s average age was 25.2 at the time of their first child’s birth (Martin et al., 2005). Approximately 56% of infants born in the United States in 2004 were White, 23% were Latino, 14% were African-American, 6% were Asian or Pacific Islander, and 1% were Native American (Hamilton et al., 2005). The majority (approximately 65%) of infants born in 2003 had parents who were married (Bumpass & Lu, 2000; Martin et al., 2005). Nationally, 35% of births were to unmarried mothers; one study suggested approximately one third of these mothers cohabitate with a partner (Bumpass & Lu, 2000) while another study found about half cohabitate (McLanahan et al., 2003). In the United States in 2004, nearly 61% of married couples with children were dual-earner families, whereas father-only employment occurred in approximately 31% of families consisting of married couples with children (United States Department of Labor, 2005a). Approximately 48% of married mothers of infants under one year old were employed outside the home in 2004, with 32% of the mothers working full-time and 17% working part-time (United States Department of Labor, 2005b).

Sample Selection Procedures

This study’s participants consisted of 132 married couples who were sharing a household and who had only one child; couples in which either partner had another child were not eligible to participate. The couples were informed that to be eligible for participation, their child should between 2 months and 13 months of age. Only surveys completed by both partners were scored and included in the study.

Couples’ participation in this study was requested through several venues. Requests were posted in several Internet bulletin boards designed for new parents. Birth announcements in newspapers nationwide were reviewed; surveys were sent to new
parents who shared a last name and whose addresses could be located. Participants were also recruited from medical offices and clinics offering obstetrical and pediatric care and from a support group for new mothers which is available to all women who give birth at a local hospital. A local midwifery center distributed surveys to past clientele who were understood to meet the sample selection criteria. Couples who met the criteria and were personally known to the researcher were also invited to participate. Lastly, potential participants were located through a baby fair held at a synagogue and were provided with paper copies of the survey or with a card listing the Internet survey website.

Participants

The participants for this study included 132 couples. Within this sample, 96 couples completed the Internet-based survey and 36 couples completed the paper-based survey. Data from individuals whose spouses did not also complete the survey were not included for analysis.

Participants’ ages, infants’ ages, and length of marriage

The participants ranged in age from 18 to 53. The average age for wives was 29.41, with a median age of 29. The average age for husbands was 31.36, with a median age of 31. The ages of the couples’ babies and the length of the couples’ marriages were calculated based on the reported wedding dates, infants’ birth dates, and dates the survey was completed. The survey completion date was recorded for those taking the Internet survey, and was determined for those taking the paper-based survey by the date written on their signed informed consent or by the postmark on the return envelope. The average amount of time between one spouse’s completion of the survey and the other’s was 3.05 days; the time between each spouses’ completion of the survey ranged from 0 to 46 days.
For the data analysis, the infant’s age and the length of the marriage were averaged within each set of couple’s data to provide consistency. The couples in this study had been married for an average length of 4.23 years, with a median marriage length of 4.03 years. The wedding dates reported by the spouses in one couple had a 4 year discrepancy, so this couple’s marriage length was not calculated and included in the sample description. The briefest reported time married was .04 years (approximately 2 weeks) while the lengthiest reported time married was 15.8 years. The parents’ infants ranged in age from 1.54 months to 13.98 months. The average age of the babies was 6.80 months, with a median age of 5.72 months.

Table 3-1. Participant Age, Infant Age, and Length of Marriage

<table>
<thead>
<tr>
<th></th>
<th>Mean</th>
<th>Median</th>
<th>SD</th>
<th>Low</th>
<th>High</th>
</tr>
</thead>
<tbody>
<tr>
<td>Wives’ age (in years)</td>
<td>29.41</td>
<td>29</td>
<td>4.49</td>
<td>18</td>
<td>41</td>
</tr>
<tr>
<td>Husbands’ age (in years)</td>
<td>31.36</td>
<td>31</td>
<td>5.26</td>
<td>21</td>
<td>53</td>
</tr>
<tr>
<td>Infant’s age (in months)</td>
<td>6.80</td>
<td>5.72</td>
<td>3.49</td>
<td>1.54</td>
<td>13.98</td>
</tr>
<tr>
<td>Length of marriage (in years)</td>
<td>4.23</td>
<td>4.03</td>
<td>2.53</td>
<td>0.04</td>
<td>15.80</td>
</tr>
</tbody>
</table>

Race

The study’s sample was primarily (93.56%) Caucasian. Of the remaining participants, only 3 (1.14%) were African-American, 5 (1.89%) were Latino, and 5 (1.89%) were Asian or Pacific-Islander.

Table 3-2. Participants’ Race

<table>
<thead>
<tr>
<th>Race/Ethnicity</th>
<th>Frequency (f)</th>
<th>Percent (%)</th>
<th>Cumulative f</th>
<th>Cumulative %</th>
</tr>
</thead>
<tbody>
<tr>
<td>Caucasian/White</td>
<td>247</td>
<td>93.56</td>
<td>247</td>
<td>93.56</td>
</tr>
<tr>
<td>African-American/Black</td>
<td>3</td>
<td>1.14</td>
<td>250</td>
<td>94.70</td>
</tr>
<tr>
<td>Hispanic/Latino/Latina</td>
<td>5</td>
<td>1.89</td>
<td>255</td>
<td>96.59</td>
</tr>
<tr>
<td>Native-American</td>
<td>0</td>
<td>0</td>
<td>255</td>
<td>96.59</td>
</tr>
<tr>
<td>Asian or Pacific Islander</td>
<td>5</td>
<td>1.89</td>
<td>260</td>
<td>98.48</td>
</tr>
<tr>
<td>Bi-racial/Bi-ethnic</td>
<td>3</td>
<td>1.14</td>
<td>263</td>
<td>99.62</td>
</tr>
<tr>
<td>Did not respond:</td>
<td>1</td>
<td>0.38</td>
<td>264</td>
<td>100</td>
</tr>
</tbody>
</table>
Three (1.14%) of the participants indicated a multi-racial or multi-ethnic background: one participant reported an African-American and Latino background, one reported a Caucasian and Latino background, and one reported a Caucasian and Asian background. One participant chose not to respond to this item.

**Education level**

More than 70% of the sample reported attaining at least a Bachelor’s degree, with more than 27% of the participants having earned a graduate degree. Fifteen men (11.36% of the husbands) and 23 women (17.42% of the wives) attained Associate’s degrees. Twenty-one men (15.91% of the husbands) and 11 women (8.33% of the wives) completed their education with a high school diploma. One participant reported she had not completed high school.

<table>
<thead>
<tr>
<th>Education</th>
<th>Frequency (f)</th>
<th>Percent (%)</th>
<th>Cumulative M</th>
<th>Cumulative F</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than High School</td>
<td>M 0</td>
<td>F 1</td>
<td>M 0</td>
<td>F 0.76</td>
</tr>
<tr>
<td>High School</td>
<td>M 21</td>
<td>F 11</td>
<td>M 21</td>
<td>F 15.91</td>
</tr>
<tr>
<td>Associate/Junior College</td>
<td>M 15</td>
<td>F 23</td>
<td>M 36</td>
<td>F 27.27</td>
</tr>
<tr>
<td>Bachelor’s</td>
<td>M 61</td>
<td>F 58</td>
<td>M 97</td>
<td>F 73.48</td>
</tr>
<tr>
<td>Graduate</td>
<td>M 34</td>
<td>F 39</td>
<td>M 131</td>
<td>F 99.24</td>
</tr>
<tr>
<td>Did not respond:</td>
<td>M 1</td>
<td>F 0</td>
<td>M 132</td>
<td>F 100</td>
</tr>
</tbody>
</table>

**Employment status**

Most of the husbands in this sample (85.61%) were employed full-time. More than 40% of the wives were employed full-time, while nearly 38% were not employed outside the home. Only 6 of the husbands (4.54%) and 19 of the wives (14.39%) were employed part-time. Two men reported working in a home-based business in addition to their full-time employment, while 7 men only reported having a home-based business. The men
who worked exclusively in a home-based business worked an average of 37.14 hours per week, with typical hours ranging for this group from 10 to 60 hours per week. Two women also reported working in a home-based business in addition to their full-time employment, while 10 women only reported having a home-based business. The women who worked exclusively in a home-based business worked an average of 19.78 hours per week, with typical hours ranging from 5 to 40 hours per week. One of the women in this group did not specify her typical working hours, noting only that they vary.

Table 3-4. Participants’ Current Employment Status

<table>
<thead>
<tr>
<th>Employment Status</th>
<th>Frequency (f)</th>
<th>Percent (%)</th>
<th>Cumulative f</th>
<th>Cumulative %</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total</td>
<td>M  F</td>
<td>M  F</td>
<td>M  F</td>
<td>M  F</td>
</tr>
<tr>
<td>Employed full-time</td>
<td>113 53</td>
<td>85.61 40.15</td>
<td>113 53</td>
<td>85.61 40.15</td>
</tr>
<tr>
<td>Employed part-time</td>
<td>6 19</td>
<td>4.54 14.39</td>
<td>119 72</td>
<td>90.16 54.54</td>
</tr>
<tr>
<td>Work in home-based business</td>
<td>7 10</td>
<td>5.30 7.58</td>
<td>126 82</td>
<td>95.46 62.12</td>
</tr>
<tr>
<td>Not employed outside the home</td>
<td>5 50</td>
<td>3.79 37.88</td>
<td>131 132</td>
<td>99.25 100</td>
</tr>
<tr>
<td>Did not respond:</td>
<td>1 0</td>
<td>0.76 0</td>
<td>132 132</td>
<td>100 100</td>
</tr>
</tbody>
</table>

Household income

The participants reported a wide range of household incomes. However, the household income level most reported by the participants was over $100,000 (26.52%). Only 11 participants (4.17%) reported a household income of less than $20,000. The majority of the participants (58.33%) reported household income levels that were fairly evenly distributed among the income levels ranging from $20,000 to $80,000. Seven participants (2.65%) did not respond to this item.
Table 3-5. Participants’ Reported Household Income

<table>
<thead>
<tr>
<th>Income</th>
<th>Frequency (f)</th>
<th>Percent (%)</th>
<th>Cumulative f</th>
<th>Cumulative %</th>
</tr>
</thead>
<tbody>
<tr>
<td>Under $10,000</td>
<td>2</td>
<td>0.76</td>
<td>2</td>
<td>0.76</td>
</tr>
<tr>
<td>$10,000-14,999</td>
<td>3</td>
<td>1.14</td>
<td>5</td>
<td>1.90</td>
</tr>
<tr>
<td>$15,000-19,999</td>
<td>6</td>
<td>2.27</td>
<td>11</td>
<td>4.17</td>
</tr>
<tr>
<td>$20,000-29,999</td>
<td>22</td>
<td>8.33</td>
<td>33</td>
<td>12.50</td>
</tr>
<tr>
<td>$30,000-39,999</td>
<td>20</td>
<td>7.58</td>
<td>53</td>
<td>20.08</td>
</tr>
<tr>
<td>$40,000-49,999</td>
<td>24</td>
<td>9.09</td>
<td>77</td>
<td>29.17</td>
</tr>
<tr>
<td>$50,000-59,999</td>
<td>29</td>
<td>10.98</td>
<td>106</td>
<td>40.15</td>
</tr>
<tr>
<td>$60,000-69,999</td>
<td>28</td>
<td>10.61</td>
<td>134</td>
<td>50.76</td>
</tr>
<tr>
<td>$70,000-79,999</td>
<td>31</td>
<td>11.74</td>
<td>165</td>
<td>62.50</td>
</tr>
<tr>
<td>$80,000-89,999</td>
<td>10</td>
<td>3.79</td>
<td>175</td>
<td>66.29</td>
</tr>
<tr>
<td>$90,000-99,999</td>
<td>12</td>
<td>4.54</td>
<td>187</td>
<td>70.83</td>
</tr>
<tr>
<td>Over $100,000</td>
<td>70</td>
<td>26.52</td>
<td>257</td>
<td>97.35</td>
</tr>
<tr>
<td>No response</td>
<td>7</td>
<td>2.65</td>
<td>264</td>
<td>100</td>
</tr>
</tbody>
</table>

Religious preference

The sample was largely Christian, with 52.68% reporting religious preferences of various Christian denominations or adherence to non-denominational Christian beliefs.

The second largest group of participants (15.15%) reported being agnostic, atheist, or having no religious preference. Nearly 7% of the participants were Jewish. More than a fifth of the sample (20.45%) chose not to respond to this item. The remainder (4.75%) reported other religious preferences (detailed in Table 3-6), including combined preferences reported by three participants (consisting of “Catholic/Lutheran,” “Jewish/Buddhist,” and “Methodist/Catholic”).

Table 3-6. Participants’ Reported Religious Preferences

<table>
<thead>
<tr>
<th>Religious Preference</th>
<th>Frequency (f)</th>
<th>Percent (%)</th>
<th>Cumulative f</th>
<th>Cumulative %</th>
</tr>
</thead>
<tbody>
<tr>
<td>Christian:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Catholic</td>
<td>28</td>
<td>10.61</td>
<td>28</td>
<td>10.61</td>
</tr>
<tr>
<td>Greek Orthodox</td>
<td>1</td>
<td>0.38</td>
<td>29</td>
<td>10.99</td>
</tr>
<tr>
<td>Protestant (unspecified)</td>
<td>3</td>
<td>1.14</td>
<td>32</td>
<td>12.13</td>
</tr>
<tr>
<td>Lutheran</td>
<td>13</td>
<td>4.92</td>
<td>45</td>
<td>17.05</td>
</tr>
<tr>
<td>Presbyterian</td>
<td>3</td>
<td>1.14</td>
<td>48</td>
<td>18.19</td>
</tr>
<tr>
<td>United Church of Christ</td>
<td>4</td>
<td>1.52</td>
<td>52</td>
<td>19.71</td>
</tr>
</tbody>
</table>
Table 3-6. Continued

<table>
<thead>
<tr>
<th>Religious Preference</th>
<th>Frequency (f)</th>
<th>Percent (%)</th>
<th>Cumulative f</th>
<th>Cumulative %</th>
</tr>
</thead>
<tbody>
<tr>
<td>Christian Reformed Church</td>
<td>1</td>
<td>0.38</td>
<td>53</td>
<td>20.09</td>
</tr>
<tr>
<td>United Christian</td>
<td>1</td>
<td>0.38</td>
<td>54</td>
<td>20.47</td>
</tr>
<tr>
<td>Baptist</td>
<td>20</td>
<td>7.58</td>
<td>74</td>
<td>28.05</td>
</tr>
<tr>
<td>Quaker</td>
<td>2</td>
<td>0.76</td>
<td>76</td>
<td>28.81</td>
</tr>
<tr>
<td>Methodist</td>
<td>16</td>
<td>6.06</td>
<td>92</td>
<td>34.87</td>
</tr>
<tr>
<td>Pentecostal</td>
<td>1</td>
<td>0.38</td>
<td>93</td>
<td>35.25</td>
</tr>
<tr>
<td>Episcopalian</td>
<td>6</td>
<td>2.27</td>
<td>99</td>
<td>37.52</td>
</tr>
<tr>
<td>Disciples of Christ</td>
<td>2</td>
<td>0.76</td>
<td>101</td>
<td>38.28</td>
</tr>
<tr>
<td>Evangelical</td>
<td>3</td>
<td>1.14</td>
<td>104</td>
<td>39.42</td>
</tr>
<tr>
<td>Non-denominational</td>
<td>11</td>
<td>4.17</td>
<td>115</td>
<td>43.59</td>
</tr>
<tr>
<td>Christian (unspecified)</td>
<td>24</td>
<td>9.09</td>
<td>139</td>
<td>52.68</td>
</tr>
<tr>
<td>Jewish</td>
<td>18</td>
<td>6.82</td>
<td>157</td>
<td>59.50</td>
</tr>
<tr>
<td>Buddhist</td>
<td>2</td>
<td>0.76</td>
<td>159</td>
<td>60.26</td>
</tr>
<tr>
<td>Muslim</td>
<td>1</td>
<td>0.38</td>
<td>160</td>
<td>60.64</td>
</tr>
<tr>
<td>Others:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Religious Scientist</td>
<td>1</td>
<td>0.38</td>
<td>161</td>
<td>61.02</td>
</tr>
<tr>
<td>Pagan</td>
<td>2</td>
<td>0.76</td>
<td>163</td>
<td>61.78</td>
</tr>
<tr>
<td>Spiritual</td>
<td>4</td>
<td>1.52</td>
<td>167</td>
<td>63.30</td>
</tr>
<tr>
<td>Agnostic, Atheist, None</td>
<td>40</td>
<td>15.15</td>
<td>207</td>
<td>78.45</td>
</tr>
<tr>
<td>Combined preferences</td>
<td>3</td>
<td>1.14</td>
<td>210</td>
<td>79.59</td>
</tr>
<tr>
<td>Did not respond:</td>
<td>54</td>
<td>20.45</td>
<td>264</td>
<td>100.04</td>
</tr>
</tbody>
</table>

Note: Percentages sum to greater than 100% due to rounding.

Data Collection Procedures

The compilation of surveys used in this investigation was piloted prior to collecting data from the sample. A small group of mothers and fathers with young children (approximately 9 parents) completed the survey to test the clarity of the survey questions and instructions. The group piloted both the paper copy of the survey and the Internet version. Couples from this pilot group reported taking 15 to 20 minutes to complete the survey booklet; participants in the study were provided with this estimate in the invitation to participate. After the survey was piloted and revisions made to enhance its clarity and ease of completion, the survey was administered to couples in the study sample. Approval of the University of Florida Institutional Review Board was obtained before the
study commenced. Participants also provided their informed consent before taking part in the study.

All participants were given the option to receive a paper copy of the survey booklet used in this study or to complete an Internet version of the survey. Any members of the sample who desired more information about the study before they decided whether to participate were contacted by the researcher. These contacts were made by telephone or e-mail (depending on the couples’ preference and the contact information available).

Couples who were mailed a paper copy of the survey were each sent $1.00 as a small token incentive for taking part in the study; Dillman (2000) suggested a token incentive of a dollar or two may significantly increase response rate and is more effective than a larger award or chance at a prize promised after completion of the survey. Couples choosing to complete the Internet version of the survey were provided with links to Internet resources that may be of interest to new parents as an incentive for participating. Participants contacted through the baby fair who indicated they would complete the survey were allowed to choose a nominal gift. In addition to these small incentives, couples who chose to participate in the study were eligible to take part in a workshop offered after the study’s completion or to receive an article containing the information that was to be presented in the workshop; participants completing the survey online were only offered the option of receiving the written information whereas participants completing the paper-based survey were given both options. Of the couples who completed the paper-based survey, 19 asked to receive the written information; of the participants who completed the Internet version, 51 expressed an interest in receiving the written information. Only 3 couples (who each lived in a different part of the country)
expressed interest in participating in the workshop; therefore, these couples were sent the written information in lieu of the workshop. The article focused on helpful coping strategies for couples transitioning to parenthood and included results from this investigation.

Parents in the study sample given a paper copy of the survey received an informed consent letter, two copies of the survey packet, and a postage-paid envelope in which to return the completed questionnaires. The surveys were marked with a separate code for each couple when returned so partners’ responses could be compared to each other in data analysis. Parents completing an online survey were matched by their reported wedding date, child’s birth date, child’s sex, and the last four digits of their telephone number. Participants completing the paper-based survey were asked to sign an informed consent form. Participants completing the Internet-based survey were directed to an informed consent letter immediately upon accessing the survey website, and were required to indicate they had read the information and agreed to participate before they could proceed to complete the questionnaires. They were also required to indicate their eligibility to participate in the study before they could begin the Internet-based survey. All couples participating in the study were instructed to respond to the questionnaires independently and to avoid discussing their responses until both partners’ surveys were completed and either sealed in the provided envelope or electronically submitted.

The informed consent letter for the Internet-based survey was located on the researcher’s webspace provided by the University of Florida. Once participants indicated their informed consent, they could begin completing the survey which was hosted on a private server. The server itself and access to the database where results from the survey
were held were password-protected, ensuring the confidentiality of the data. Participants could access the survey by clicking on a direct link or they could enter the Internet address of the survey into their Internet browser.

Following Dillman’s (2000) suggestion, whenever possible, participants were sent a note (by postal mail or e-mail) one week after they received the survey or survey link thanking them for their involvement and asking them to complete and return the survey if they had not already done so; participants who indicated they wished to complete the Internet version of the survey were provided with the Internet link again. Requests posted on Internet message boards were also followed by a reminder posted a week after the original post.

**Instrumentation and Operationalized Variables**

Participants were asked to complete a set of five instruments and a demographic questionnaire. Four of these instruments have been previously established in past research, while a fifth measure and the demographic questionnaire were designed for use in this investigation. These measures assessed the variables described earlier in this chapter.

**Couple Conflict Type**

The couple conflict type scale developed by Holman and Jarvis (2003) includes four short paragraphs, each describing one of Gottman’s four couple conflict types: volatile, conflict-avoiding, validating, and hostile. Participants are instructed to indicate how often their conflicts with their partner resemble each of the four couple conflict types; a 5-point scale includes possible responses of “never,” “rarely,” “sometimes,” “often,” and “very often.” Participants can receive a score between 1 and 5 for each of the four types. Because Gottman intended couple conflict types to reflect relational patterns
rather than individual approaches to conflict, for the purpose of this investigation partners’ scores were averaged to provide a “couple” score indicating the couple’s general perception of how often each particular conflict style is used in their relationship. Thus each couple had an averaged score for each of the four conflict types. A “discrepancy” score was also calculated to determine the variability across partners’ perceptions of how often each conflict style is used; discrepancies between partners’ ratings for each of the four types were calculated and summed to provide a total discrepancy score.

This measure of couple conflict type was initially tested with two nonrandom samples who learned of the survey through a college class, relationship enrichment programs, or who found an Internet version of the survey on their own (Holman & Jarvis, 2003). The first sample included 376 married couples ($N = 752$), who had been in a relationship for an average of 4.9 years. The male participants’ average age was 27.5 and the female participants’ average age was 25.9. Approximately 97% of the sample was White. The majority of the sample identified as Mormon (77%), with approximately 10% of the sample identifying as Protestant and about 12% identifying as Catholic. Most of the participants (81%) had graduated from college. The second sample included 903 unmarried couples ($N = 1806$) who had been dating for at least 7 months; the couples had been in their relationship for an average of 1 to 2 years. The male participants’ average age was 23.9 and the female participants’ average age was 22.8. Approximately 84% of the sample was White while approximately 7% of the sample was Latino/Latina. About 41% of the sample identified as Protestant, 37% as Catholic, 12% as identifying with no religion, and 11% identifying with a religion not listed. Forty-six percent of the men were
enrolled in college at the time of the research and 28% had graduated from college. Seventy-one percent of the women were enrolled in college and 19% had graduated.

A cluster analysis of the data from the two samples produced the four styles identified by Gottman, demonstrating the factorial validity of the scale. In the sample of married couples, 13% of the husbands were classified as hostile, 19% as volatile/validating, 32% as conflict-avoiding, and 37% as validating. For the wives, 14% were classified as hostile, 21% as volatile, 41% as conflict-avoiding/validating, and 24% as validating. In the sample of unmarried couples, 19% of the men were classified as hostile, 28% as volatile/validating, 29% as conflict-avoiding, and 24% as validating. For the unmarried women, 17% were classified as hostile, 33% as volatile/validating, 37% as validating, and 14% as regulated undifferentiated. The regulated undifferentiated cluster found among the unmarried women was comprised of respondents indicating very infrequent use of a hostile couple conflict type, and only moderate frequency of using validating, volatile, or conflict-avoiding conflict types. In each sample, some clusters combined couple conflict types (i.e., volatile/validating and conflict-avoiding/validating); the authors suggested these findings are consistent with Gottman’s (1994) research, in which couples using a volatile conflict style believe “volatility in conflicts is a ‘small part’ of a loving relationship” (Holman & Jarvis, 2003, p. 279) and conflict-avoiding couples perceive themselves as engaging in some degree of conflict.

The factor analysis of scale responses produced a set of factors paralleling Gottman’s four couple conflict types across two significantly different groups. Hence the construct validity of the scale was supported. Additionally, participants classified as employing a hostile couple conflict type reported the lowest relationship satisfaction and
stability, suggesting the predictive validity of the scale. As this scale has been developed only recently, no reliability information for the measure is available at this time. This instrument has a 10th grade reading level as calculated by the SMOG Reading Formula or an 8th grade reading-level as determined by the Flesch-Kincaid Formula.

Although this scale is not yet well-established and more validity and reliability information is needed, its grounding in Gottman’s theory and research makes its utility promising. Gottman and other researchers have rigorously tested his theory of couple conflict types, lending this scale a great deal of construct validity. Holman and Jarvis created the scale in part to test whether couple conflict types could be identified through survey methods, as previous research had relied solely on observational data. Although observational data provides an important measure of this construct, a self-report of couple conflict type is a more time-efficient method of measurement and may be more easily completed by couples and professionals with limited time and resources. It also provides an insider’s view of the couple rather than relying solely on an outsider’s observations.

As noted above, while other studies have examined conflict among new parents, most have conceptualized conflict strategies as either constructive or destructive. Gottman’s model identifies three different couple conflict types that are functional, and one couple conflict type that is not. Little is known about how these four couple conflict types manage conflicts related to the transition to parenthood or to couples’ division of labor. Different conflict strategies may prove successful or unsuccessful depending on their match with a couple’s preferred conflict style. Couple conflict type may be a critical variable to be considered when designing interventions to help couples manage conflicts related to the transition to parenthood.
Violated Expectations

Violated expectations were assessed through four questions written for this investigation concerning couples’ sharing of domestic labor. Two questions asked the participants to note how equally or unequally they share parenting tasks or housework; response choices included “I do much more than my partner,” “I do somewhat more than my partner,” “We share things equally,” “My partner does somewhat more than I do,” and “My partner does much more than I do.” Two additional questions asked participants to note how they had expected they would be sharing these responsibilities now (when considering the expectations they had approximately a month before their baby’s birth); response choices mirrored those of the previous questions, with the words “I expected” preceding each of the response options.

Responses for each question were coded from 1 to 5 and were dependent on the gender of the participant: lower scores for each question indicated the wife does more than her husband, or was expected (by herself or her husband) to do more than him; higher scores for each question indicated the husband does more than his wife or was expected to do more than her. Responses to the two questions concerning the participants’ expectations were summed and then subtracted from the total of the two questions concerning how participants believe they share responsibilities now. The discrepancy between the reality of the couples’ division of labor and their expectations comprised the “violated expectations” score. Individual scores could range from –8 (indicating the wife is doing much more than was expected prior to the baby’s birth) to 8 (indicating the husband is doing much more than was expected). A score of 0 indicates the absence of violated expectations for the individual. Responses to the violated expectations assessment were converted to couple scores by averaging spouses’
responses. These couple scores were used in the analyses examining other couple data. Individual scores for the measure were used in the analyses examining individual data. Wives’ violated expectations have been found to strongly influence individual and relational outcomes, while husbands’ violated expectations have not been as thoroughly investigated. Couple scores may possibly obscure differences between men’s and women’s experiences of violated expectations.

Cronbach’s alpha was calculated for the violated expectations measure and found to be .69. This reliability measurement indicates nearly 70% of the variance in participants’ violated expectations scores can be contributed to true score variance.

**Division of Household Labor: Task Differentiation and Role Dissatisfaction**

The “Who Does What?” questionnaire assesses couples’ perceptions about their division of labor across three spheres: household and family tasks, family decisions, and child-related tasks. The subsection measuring the division of household and family tasks contains 12 items listing various family chores and responsibilities (e.g., “planning and preparing meals,” “taking out the garbage,” “providing income for our family,” and “house cleaning”). The family decisions subsection lists 12 decision-making areas such as “how we spend time at home,” “initiating lovemaking,” and “deciding about vacations.” As noted above, this subsection was not included in the present study since family decision-making does not change significantly across the transition to parenthood, and since decision-making patterns were less relevant to this investigation’s research questions. The final subsection lists 12 tasks related to care of the child (e.g., “feeding the baby,” “responding to the baby’s crying in the middle of the night,” and “playing with the baby”). Twelve additional items in this subsection ask participants to rate their level of responsibility for the child during six time-periods for both weekdays and weekends,
from “getting up/breakfast/dressing baby” to “middle of the night needs.” In this investigation, additional instructions were added to this section of the original questionnaire to aid participants’ comprehension. Participants were asked to “show who usually cares for the baby during the following times on weekdays and weekends.” For each of the items listing tasks or responsibilities, participants rate their partner’s and their own contribution by choosing a number on a 9-point scale that best represents their division of labor, recording this in a column labeled “how it is now.” They note their ideal division of labor in a column labeled “how I would like it to be.” On the rating scale, 1 represents “she does it all,” 9 represents “he does it all,” and 5 is labeled as “we both do this about equally.”

In addition to these items, the two subsections included in this investigation (family household tasks and child-related tasks) contain a question asking the respondent how satisfied he or she is with the couples’ division of labor in that area, with choices including “very satisfied,” “pretty satisfied,” “neutral,” “somewhat dissatisfied,” and “very dissatisfied.”

Six versions of the “Who Does What?” questionnaire are currently available for use with the following groups: couples without children, couples expecting their first child, parents of 6-month-olds, parents of 18-month-olds, parents of 3 or 4-year-olds, and parents of 5 or 6-year-olds. The household and family tasks subsection and the family decisions subsection are identical across all six versions of the survey. For the child-related tasks subsection, couples without children and expectant couples are asked to rate how they believe their division of labor will or would be. Parents of children from 3 to 6 years of age are asked additional questions not included in the other forms. Child-care
questions differ slightly across the scale’s versions to reflect the different tasks involved in caring for children of different ages. For the purpose of this investigation, participants completed the version created for parents of 6-month-olds. The tasks listed in this version seem relevant to care of all infants. Language of this version and the version created for parents of 18-month-olds differs only slightly; for example, the word “baby” is used in one version while the word “child” is used in the other, and an item for “feeding the baby” in the version for parents of 6-month-olds becomes “mealtimes with our child” in the version for parents of 18-month-olds.

Cowan and Cowan suggest three types of scoring. For each participant, a Role Arrangement/Involvement Score can be computed by averaging the individual responses to “how it is now” within each subsection. Because couples’ division of labor can vary markedly within the three spheres measured, Cowan and Cowan do not recommend combining the three subsection scores to form a total score. This involvement score can range from 1-9 for each subsection, with numbers lower than 5 meaning the woman is responsible for more than 50% of the labor related to the particular sphere, and higher numbers meaning the man is responsible for more than 50%. Because averaging the scores within a subsection obscures how much task sharing or role differentiation exists, a Task Sharing Score can also be calculated. The absolute difference between the “how it is now” score for each item and 5 (which represents equal sharing of tasks and responsibilities) is calculated and summed to provide the measure of task sharing or differentiation. This score ranges from 0 to 48 for the first two spheres, and from 0 to 96 for the section related to child care. Lower numbers on the task sharing scores indicate greater sharing of individual tasks, while higher numbers indicate greater degrees of role
differentiation in the couple. As noted above, only the task sharing score was calculated
and included for analysis in the present investigation since a balanced division of labor
seems more strongly related to positive outcomes rather than the overall involvement of
each partner (Blair & Hardesty, 1994). Additionally, Cowan and Cowan (1988) reported
the overall involvement of spouses in completing family labor did not change
significantly across the transition to parenthood (with women completing more of the
family tasks both before and after the arrival of the baby), whereas task sharing tended to
decrease across the transition. The task sharing score was renamed the task differentiation
score for the purpose of clarity in the current study, as higher scores indicate more task
differentiation and less task sharing.

Lastly, two types of Role Satisfaction Scores can be computed for the “Who Does
What?” First, a discrepancy score can be found for each item by finding the absolute
difference between respondents’ “how it is now” and “how I would like it to be” scores.
These discrepancy scores are summed for each subsection to provide the Role
Satisfaction Score, with lower scores indicating more satisfaction and higher scores
indicating less satisfaction. For each of the subsections assessing household tasks and
decision-making, role satisfaction scores can range from 0 to 96, and for the child-related
tasks subsection scores can range from 0 to 192; a total score can range from 0 to 384.
Alternatively, the individual question in each subsection about satisfaction with the
division of labor can provide a more global assessment of satisfaction for each sphere.
Scores for each subsection can range from 1 to 5; therefore a total role satisfaction score
for the family household tasks subsection and the child-related tasks subsection can range
from 2 to 10. Cowan and Cowan (1988) found a .30 to .40 correlation between the two
ways of measuring role satisfaction (i.e., between the general satisfaction questions in each subsection and the role satisfaction score computed by noting differences between couples’ current division of labor and what they would like); they noted this relatively weak correlation suggests the two measures may be assessing different aspects of satisfaction. In the present study, only the global assessment of satisfaction was included for analysis. Although examination of both approaches to measuring satisfaction would be beneficial, limiting analysis to only the global satisfaction assessment reflects the resources available for conducting this study. Of the two approaches to measuring role satisfaction, the global satisfaction assessment appears to be more relevant as it has been more strongly related to outcome measures of marital adaptation than the measure of actual-ideal discrepancies (C. P. Cowan & Cowan, 1988). The role satisfaction score was renamed the role dissatisfaction score for the purpose of clarity in the current study, as higher scores indicate more role dissatisfaction and less satisfaction.

For the purpose of this study, partners’ individual scores for task differentiation and for role dissatisfaction were converted to produce “couple” scores. Couple scores were used since a limitation of previous research has been the lack of comparison between partners’ scores in data analysis, and the aim of this study was to analyze patterns at the relational level rather than the individual level. For both the task differentiation scores (of family household tasks and child-related tasks) and the role dissatisfaction score, couple scores were computed using the following equation developed by Lavee and Olson (1993):

\[ C = \frac{h + w}{2} - \frac{k|h - w|}{2}\]
In this equation, a couple score is calculated by first finding the average between the husband’s and wife’s individual scores. The partners’ average discrepancy between their scores is then found by taking the absolute value of the difference between the husband’s and wife’s individual scores and dividing this by 2. This average discrepancy is then multiplied by a constant \( k \), and the result is subtracted from the average of the husband’s and wife’s individual scores to produce the couple score. To calculate the couple score for task differentiation and role dissatisfaction, the formula was changed slightly so the discrepancy was added to the average of the spouses’ scores rather than subtracted; this allows the couple scores to be more comparable to the task sharing and role satisfaction scores traditionally derived from the “Who Does What?” where higher scores indicate lower degrees of task sharing and satisfaction. Lavee and Olson specified that \( k \) is a number higher than 0 but less than 1. If \( k \) is set at 0, the couple score is equal to the average of the spouses’ individual scores with no correction made to account for the discrepancy between their scores. If \( k \) is set at 1, the couple score is equal to the individual score of whichever spouse produced the lower individual score. In their study, Lavee and Olson set \( k \) to equal .5 since this represents the midpoint between 0 and 1; the present study also set \( k \) to .5 when calculating couple scores. With this equation, the couple score always is equal to the average of spouses’ scores when there is no discrepancy between scores; the couple score also is lower than the average of spouses’ scores but higher than the lowest individual score when a discrepancy between spouses’ scores exists. Higher degrees of discrepancy between partners’ scores result in couple scores reflecting higher degrees of task differentiation and role dissatisfaction.
Cowan and Cowan first used the “Who Does What?” questionnaire in a pilot study including 8 couples ($N = 16$) in which the female partners were in their second trimester at the start of the study (Cowan et al., 1978). The mean age of the participants was 27.8, with a range of 21 to 37 years in age. Six of the couples were White and two were African-American. Six couples were married and two were cohabitating; the couples had been in a relationship for an average of 3.5 years. A second study used the questionnaire with a sample of 96 couples ($N = 192$) recruited from obstetricians’ offices, a managed care organization, and community newsletters. Seventy-two of these couples were expecting their first child, with the female partner in her last trimester of pregnancy when first asked to participate; the researchers assessed these couples up to the time the couples’ infants were 18 months old. Twenty-four of the couples in the original sample were not expecting a child at the start of the research and had not yet decided if they wanted to have a child in the future; over the 2 year span of the study, five of these couples had children. In these studies, Cowan and Cowan found both traditional and non-traditional changes in the division of household labor, varying by task and by the amount of time since the birth of the baby. Decision-making responsibilities seemed to be somewhat gender-divided prior to the birth of the baby and did not change. Fathers’ involvement in child care tasks was significantly lower than either partner had predicted it would be. Mothers reported less satisfaction with the division of labor than fathers, though their level of satisfaction increased when their partners contributed more to domestic labor.

Reliability for the “Who Does What?” questionnaire generally appears good, with Cronbach’s alpha and Spearman-Brown’s split-half reliabilities ranging from .92 to .99.
for all of the subscales (Shehan & Lee, 1990). Reliability for the instrument was lower in the current investigation, with an internal consistency of .51 calculated for the family and household tasks subscale and an internal consistency of .88 calculated for the child-related tasks subscale; Cronbach’s alpha for the global measure of role dissatisfaction was .64. As with similar measures of couples’ divisions of labor, parents’ role satisfaction and fathers’ involvement in family tasks as measured by the “Who Does What?” are associated with higher levels of marital satisfaction (P. A. Cowan & Cowan, 1988), demonstrating the measure’s convergent and predictive validity.

Scoring for the “Who Does What?” questionnaire does not provide for finer distinctions to be made regarding the division of labor in terms of time needed to complete each task or the relative frequency with which each task is completed; for example, one item assessing “planning and preparing meals” (a task involving forethought and which is completed on a daily basis) is essentially equivalent to another item assessing “taking out the garbage” (a less-frequently required task). However, the questionnaire does contain items describing planning, maintaining connections with others, and making decisions and choices that all reflect the “mental labor” Walzer (1996, 1998) noted is commonly overlooked. It also is written for parents of infants, with items measuring specific aspects of caring for a young child that are often omitted or simplified in other measures of domestic labor. Additionally, the questionnaire’s 9th grade reading-level as determined by the SMOG Reading Formula or 6th grade reading-level as determined by the Flesch-Kincaid Formula, suggests it is appropriate for a community sample.
Marital Disaffection

The 21 Likert-type items comprising the Marital Disaffection Scale (MDS) are presented in the form of statements regarding the participant’s feelings about his or her partner and their relationship. Of these, 11 statements express positive feelings of caring, attachment, or affection whereas 10 statements express feelings of disaffection. Because the scale is balanced in items reflecting positive and negative feelings, the scale may be as much a measure of caring or satisfaction as it is of disaffection (Johnson, 2001). Respondents indicate their agreement with the statements, with possible responses including “very true,” “somewhat true,” “not very true,” or “not at all true”. The 11 items indicating positive feelings are reverse-scored, and item scores are added to create a total disaffection score. Scores can range from 21 to 84, with higher numbers indicating greater levels of disaffection. Kayser (1993, 1996) noted scores of 43 or higher show at least some level of disaffection. For the purpose of the current investigation, partners’ individual scores were converted to “couple” scores using the formula developed by Lavee and Olson (1993) detailed above. A couple score was used since it is more reflective of the relational level of analysis employed in this study, and allows comparison of partners’ scores rather than only group comparisons between husbands and wives. As with the task differentiation and role dissatisfaction scores previously described, the formula for the MDS couple score was modified slightly (by adding the discrepancy score rather than subtracting it from the average of the spouses’ individual scores); thus the couple score was more comparable to the traditional scoring of the MDS, with higher couple scores indicating greater levels of disaffection.

The initial developmental study of the MDS was completed with a nonrandom sample of 76 participants who were recruited through college classes, church groups, and
a private mental health practice. The participants were married, but only one partner from
a couple participated in the study. The average age of the participants was 31.6 years-old,
and the mean length of the respondents’ marriage was 8.1 years. In this study, Kayser
(1996) tested the validity and reliability of her original version of the MDS, which
contained 27 items; after testing this version, 6 items were eliminated based on the data,
resulting in the 21-item MDS. A correlation of .93 was found between the MDS and
another measure of disaffection developed by Snyder and Regts (1982), supporting the
concurrent validity of the MDS. Validity of the MDS was further supported by findings
of a -.56 correlation with a general question about marital happiness, a -.86 correlation
with a general question about marital closeness, and a correlation of .61 with a question
about currently being in marriage counseling. Internal consistency was demonstrated by a
Cronbach’s alpha score of .97. Internal consistency of the scale was found to be
somewhat lower in the present study, with Cronbach’s alpha calculated at .88.

To obtain normative data for the MDS, Kayser (1993, 1996) conducted a study
involving a random sample of 354 married individuals living in one of two Midwestern
cities. Again, only one spouse in the marriage completed the questionnaire. Although an
equal number of surveys were sent to men and women, 59% of the respondent group
completing the survey were women, and 41% were men. The participants’ ranged in age
from 21 to 84, with a mean age of 46.2 years-old. Length of marriage ranged from 1 to 58
years, with an average length of 20.8 years. Seventeen percent of the respondents were
remarried, and 80% of the participants had children from their current marriage. The
participants’ average household income was $50,000-59,999, and 56% were college
graduates. In the investigation with a random sample of married individuals, Kayser
(1993, 1996) found marital disaffection is not normally distributed. Most of the respondents had low levels of disaffection. Twenty percent of the sample indicated an “above average” or “high” level of disaffection (scoring 43 or above on the MDS), with women expressing feelings of disaffection more frequently than men (Kayser, 1993).

A third study designed to test the validity of the MDS was conducted with a random sample of female members of the American Counseling Association (Flowers, Robinson, & Carroll, 2000). The sample consisted of 323 women. The participants’ ages ranged from 26-89 years-old with an average age of 47.9, and 77.6% of the sample were currently married; for those who were married, the average time married was 18.2 years. This investigation of the MDS found a correlation of -.94 with a measure of respondents’ positive feelings toward their partner, a correlation of -.63 with marital status, a correlation of .36 with a measure of the partner’s problem drinking, and a correlation of .48 with a measure of “workaholic behavior of the spouse” (p. 1102).

The MDS has not yet been validated for use with non-married participants, although the author has expressed her belief that its use is appropriate with close relationships other than marriage (Kayser, 1996). It also has not been tested with culturally and socioeconomically diverse samples. Despite these limitations, the MDS appears useful for several reasons. Because items are balanced in reflecting feelings of both disaffection and caring, the MDS may be less susceptible to participants trying to respond in socially desirable ways compared to a scale measuring only satisfaction. Additionally, many measures of satisfaction or strain assess couples’ level of conflict; however as Kayser (1996) notes, conflict is usually present to some degree in all relationships and does not necessarily indicate the relationship is deteriorating. The MDS
seems to assess a couples’ sense of intimacy, affection, and the strength of the couples’ friendship, all of which are susceptible to strain across the transition to parenthood.

Lastly, another advantage of the MDS is its high readability, with the SMOG Reading Formula indicating a 7th grade reading-level, and the Flesch-Kincaid Formula indicating a 4th grade reading level.

Individual Well-Being

Individual well-being was assessed by the Mental Health Inventory Short-Form 5 (MHI-5), a 5-item scale designed to measure psychological well-being and distress. The MHI-5 was developed to provide a shorter measure that would highly correlate with the original 38-item version of the Mental Health Inventory. It measures anxiety, depression, general positive affect, and behavioral/emotional control. Each of the five questions instructs the respondents to answer according to how much of the time they have experienced a particular feeling during the past month. Participants are provided with six possible responses, representing the frequency of the experience being measured, and are asked to choose which answer is most applicable. For the first four questions, the response choices include “All of the time,” “Most of the time,” “A good bit of the time,” “Some of the time,” “A little of the time,” or “None of the time.” For the last question, the response choices include “Always,” “Very often,” “Fairly often,” “Sometimes,” “Almost never,” or “Never.” The questions addressing general positive affect are reverse scored so that higher scores on the MHI-5 indicate more positive well-being and lower scores indicate more distress. Scores on the MHI-5 are converted to a 100 point scale and averaged, so the total score can range from 0 to 100. The Rand Corporation reports an average score for the MHI-5 of 70.38 based on a study of 2,471 participants (Rand Health, n.d.). For the purpose of this investigation, a “couple” score was calculated using
Lavee and Olson’s (1993) formula described above. Couple scores were employed rather than individual scores so discrepancies between partners’ levels of individual well-being could be taken into account. Also, it is assumed each partner’s level of individual well-being will impact the other partner and their relationship; therefore moving from an individual to a relational level of analysis seems valid for this variable.

Although the MHI-5 is significantly shorter than the original 38 item Mental Health Inventory, researchers have found correlations between the two measures ranging from .92 to .95 (Davies, Sherbourne, Peterson, & Ware, 1988; Ware & Gandek, 1994). Across five samples (ranging in size from 229 participants to 10,771 participants), the item-total correlations for each of the questions ranged from .54 to .81 (Stewart, Ware, Sherbourne, & Wells, 1992). Cronbach’s alpha was found to be .90 in one sample and .86 in another (Stewart et al., 1992). Internal consistency was found to be .79 in the present study. Demonstrating its validity, the MHI-5 performed as well as the MHI-18, the GHQ-30, and the SSI-28 at detecting anxiety disorders, major depression, dysthymic disorder, and grief reactions, only being outperformed by the MHI-18 on detecting a full range of affective disorders (Berwick, 1991).

Overall, the MHI-5 seems an excellent measure of individual well-being and strain. It is balanced in measuring both positive and negative states, the absence of which has been criticized in other scales. It also demonstrates very good reliability and validity, and a high level of readability (with the SMOG Reading Formula indicating a reading-level at or below 4th grade and the Flesch-Kincaid Formula indicating a 5th grade reading-level).

**Demographic Information**

Participants’ demographic information was acquired through their responses to a series of questions concerning their personal characteristics and couple attributes. Data
was collected on the following characteristics: participants’ age, sex, race, household income, education level, employment status, student status, religious preference, length of marriage, and age of the couple’s infant.

**Research Questions**

Several research questions were investigated in this study:

1. Do task differentiation (of family household tasks and child-related tasks), violated expectations, marital disaffection, individual well-being, age, infant age, income level, and each of the couple conflict type scores (volatile, validating, conflict-avoiding, and hostile) serve as predictors of role dissatisfaction?

2. Do task differentiation (of family household tasks and child-related tasks), role dissatisfaction, marital disaffection, individual well-being, age, infant age, income level, and each of the couple conflict type scores (volatile, validating, conflict-avoiding, and hostile) serve as predictors of violated expectations?

3. Do task differentiation (of family household tasks and child-related tasks), role dissatisfaction, violated expectations, individual well-being, age, infant age, income level, and each of the couple conflict type scores (volatile, validating, conflict-avoiding, and hostile) serve as predictors of marital disaffection?

4. Do task differentiation (of family household tasks and child-related tasks), role dissatisfaction, violated expectations, marital disaffection, age, infant age, income level, and each of the couple conflict type scores (volatile, validating, conflict-avoiding, and hostile) serve as predictors of individual well-being?

5. Do task differentiation (of family household tasks and child-related tasks), role dissatisfaction, violated expectations, marital disaffection, individual well-being, age, infant age, and income level predict the couple conflict type discrepancy score?

6. Is there a relationship between the set of variables (task differentiation of family household tasks and child-related tasks, violated expectations, role dissatisfaction, marital disaffection, individual well-being, age, infant age, and income level) and the set of couple conflict type variables (volatile type score, validating type score, conflict-avoiding type score, and hostile type score)?

These research questions and the results of the survey are addressed in Chapter 4.
CHAPTER 4
DATA ANALYSIS AND RESULTS

The purpose of this study was to explore the relationships among six primary variables for couples who recently became parents for the first time, including (a) the type of couple conflict behavior typical in the relationship, (b) the extent to which violated expectations about housework and child care are present, (c) the couple’s division of household labor, specifically the degree of role differentiation evident in partners’ completion of household and child care tasks, (d) partners’ satisfaction or dissatisfaction with their family roles, (e) partners’ level of marital disaffection, and (f) partners’ level of individual well-being. In this chapter, results from a survey of 132 couples are presented. The methods used to analyze the data produced by the survey are described. Descriptive statistics for the study’s variables are given. Lastly, the study’s research questions are addressed through the results of the data analysis.

Data Analysis Procedures

The data produced from the survey were analyzed primarily through two methods. Stepwise multiple linear regression analyses were employed to determine each variable’s contribution to the variance of the outcome measures as well as the combined effect. Stepwise multiple regression analysis involves assessing the predictive quality of several independent variables to explain the variation in a given dependent variable, retaining only those variables which significantly contribute to the predictive quality of the model, and adding each of these variables to the model in sequence to determine the amount of variation in the dependent variable for which the variables can account. Canonical
correlation analysis was also used to analyze the study’s data. Canonical correlation is a variation of multiple regression and correlation. In multiple regression analysis, the relationship between a single variable and a linear combination of a set of variables is examined. In the canonical correlation procedure, the relationship between a linear combination of a set of variables and a linear combination of another set of variables is analyzed. Rather than predicting a single dependent variable from a set of independent variables, this procedure correlates two sets of variables.

**Description of the Data**

The survey used in this study consisted of four previously-established measures, one assessment designed for this investigation, and a demographic questionnaire. The results of the demographic questionnaire were presented in Chapter 3, where the sample was described. The ranges, means, and standard deviations for each of the study variables are presented in Table 4-1. In a few cases, participants gave more than one response to an item; in these instances, the two responses were averaged. The midpoint response for each scale was entered for items for which participants did not provide a response.

The descriptive statistics for the two task differentiation scales and the role dissatisfaction measure (all from the “Who Does What?” questionnaire) cannot be compared to findings from previous research; Cowan, Cowan, Coie, and Coie (1978), the questionnaire’s authors, have not provided descriptive statistics from their instrument. The mean couple score obtained from this study sample for the household task differentiation scale was 27.99, within a possible range of 0 to 48. For the child-related task differentiation scale, the average couple score was 43.63, within possible range of 0 to 84. Traditionally, scores on this scale can range from 0 to 96. However, the decision was made to exclude three items from the child-related task differentiation scale,
including items assessing who arranges child care, who cares for the baby from 9am to 1pm, and who cares for the baby from 1pm to 5pm. A significant number of participants chose not to respond to these items. Several others did provide a response (usually indicating the task was shared equally), but wrote in their comments that these items were not applicable to their family (either because their child was or was not cared for by others besides the parents). Due to the inconsistencies in response to these three items, they were removed from the scale. Within a possible range of 2 to 10, the mean role dissatisfaction score obtained with this sample was 4.47.

Table 4-1. Descriptive Statistics for the Study’s Variables

<table>
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<tr>
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<th>Range</th>
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<tr>
<td></td>
<td>Mean</td>
<td>Low</td>
<td>High</td>
<td>SD</td>
</tr>
<tr>
<td>Task differentiation (family household tasks)</td>
<td>27.99</td>
<td>14.75</td>
<td>41.25</td>
<td>5.86</td>
</tr>
<tr>
<td>Task differentiation (child-related tasks)</td>
<td>43.63</td>
<td>3</td>
<td>83</td>
<td>15.00</td>
</tr>
<tr>
<td>Role dissatisfaction</td>
<td>4.47</td>
<td>2</td>
<td>8.75</td>
<td>1.41</td>
</tr>
<tr>
<td>Violated expectations (husbands)</td>
<td>-0.45</td>
<td>-3.5</td>
<td>2</td>
<td>1.00</td>
</tr>
<tr>
<td>Violated expectations (wives)</td>
<td>-0.33</td>
<td>-4</td>
<td>3</td>
<td>1.31</td>
</tr>
<tr>
<td>Violated expectations (couple)</td>
<td>-0.39</td>
<td>-2.5</td>
<td>1.5</td>
<td>0.85</td>
</tr>
<tr>
<td>Marital disaffection</td>
<td>29.72</td>
<td>21</td>
<td>54.5</td>
<td>6.74</td>
</tr>
<tr>
<td>Individual well-being</td>
<td>69.12</td>
<td>30</td>
<td>88</td>
<td>11.45</td>
</tr>
<tr>
<td>Couple conflict type:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Volatile</td>
<td>2.30</td>
<td>1</td>
<td>5</td>
<td>0.91</td>
</tr>
<tr>
<td>Validating</td>
<td>3.17</td>
<td>1</td>
<td>5</td>
<td>0.88</td>
</tr>
<tr>
<td>Conflict Avoiding</td>
<td>2.57</td>
<td>1</td>
<td>5</td>
<td>0.82</td>
</tr>
<tr>
<td>Hostile</td>
<td>1.57</td>
<td>1</td>
<td>4</td>
<td>0.70</td>
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<tr>
<td>Discrepancy score</td>
<td>3.14</td>
<td>0</td>
<td>7</td>
<td>1.54</td>
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</table>

Note: N = 132

The violated expectations measure was created for the present study. Scores for this scale could range from –8 (indicating the wife was doing much more than was expected prior to the baby’s birth) to 8 (indicating the husband was doing much more than was expected). A score of 0 indicates the absence of violated expectations for the individual. Husbands’ mean score for this measure was -.45 while wives’ mean score was -.33.
Spouses’ scores were averaged to create a couple score. The mean couple score for the violated expectations measure was -.39.

Marital disaffection scores could range from 21 to 84. The average level of marital disaffection reported by the couples in this study was 29.72. The scale’s author did not provide the mean or standard deviation attained in her random sample survey of 354 married participants; however, she did describe the percentage of the sample whose scores fell into several ranges (Kayser, 1996). In Kayser’s study, 35% of the sample scored between 21 and 26 on the scale, 31% scored between 27 and 34, 14% scored between 35 and 42, 12% scored between 43 and 54, and 8% scored between 55 and 84. In the present study, 38.6% of the couples scored between 21 and 26 on the scale, 38.6% scored between 27 and 34, 16.7% scored between 35 and 42, 5.3% scored between 43 and 54, and .8% scored between 55 and 84. Kayser suggested a cut-off score, with 43 and above indicating some level of disaffection. In Kayser’s study, 20% of the sample reported disaffection levels at or above the cutoff whereas only slightly more than 6% of the couples in the present investigation reported disaffection levels of this magnitude.

Within a possible range of 0 to 100, the average couple score obtained with this sample for the Mental Health Inventory (MHI-5) measuring individual well-being was 69.12, similar to the average score reported by the Rand Corporation of 70.38 (Rand Health, n.d.). Husbands’ average score for individual well-being was 72.52 and wives’ average score was 72.76, both slightly above Rand’s reported average. Causing the couple score to fall slightly below Rand’s reported average were discrepancies in partners’ levels of individual well-being. While 21 couples had individual-well-being scores for both spouses below Rand’s reported mean, 33 couples included wives above
the average and husbands below the average reported by Rand, and 32 couples included wives below the average and husbands above the average. Differences between spouses’ scores ranged from 0 to 48, with an average discrepancy of 14.06.

Although Holman and Jarvis (2003) did not create couple scores for their research, the couple conflict type scores found in this investigation are comparable to the individual scores they reported in their development of the couple conflict type scale. Participants were asked to indicate on a five-point scale how well each of four different couple conflict types represented their typical conflict behaviors. This study found couple averages of 2.30 for the volatile type, 3.17 for the validating type, 2.57 for the conflict avoiding type, and 1.57 for the hostile type. Similarly, Holman and Jarvis found averages of 2.32 for husbands and 2.33 for wives for the volatile type, 3.36 for both husbands and wives for the validating type, 2.47 for husbands and 2.30 for wives for the conflict avoiding type, and 1.67 for husbands and 1.68 for wives for the hostile type.

Holman and Jarvis (2003) also completed a cluster analysis, grouping their sample into couple conflict types. In the present study, the conflict types were left as continuous variables for each of the couples, and participants were not grouped into a specific conflict type. However, frequencies concerning the couple conflict types were calculated based on whether couples scored at or above the midpoint of the scale for each type (indicating their agreement that the specific conflict type resembled their usual approach to conflict “sometimes,” “often,” or “very often”). Nearly half the couples in the sample scored at or above the midpoint for only one of the four couple conflict types. Thirty-three couples (25%) only endorsed the validating type (rating it at or above the scale’s midpoint), 15 (11.4%) only endorsed the volatile type, 11 (8.3%) only endorsed the
conflict-avoiding type, and 2 (1.5%) only endorsed the hostile type at the specified level. As in Holman and Jarvis’s study, a number of the participants highly rated combinations of the validating and other conflict types. Thirty-three couples (25%) scored at or above the midpoints for both the conflict-avoiding and validating types, while 11 (8.3%) scored at or above the midpoints for both the volatile and validating types; one couple endorsed both the hostile and validating conflict types. Other combinations of types occurred less frequently: four couples endorsed both the volatile and conflict-avoiding types at or above the scale’s midpoint, 4 endorsed both the volatile and hostile types, and 1 couple endorsed the hostile and conflict-avoiding types. Finally, 4 couples scored at or above the midpoint for all three regulated types (volatile, conflict-avoiding, and validating), while 1 couple endorsed all four types at the specified level. Twelve couples did not score at or above the midpoint for any of the couple conflict types.

Correlations between the study’s variables were computed and are presented in Table 4-2. Several significant correlations were found. Not surprisingly, household task differentiation was positively associated with child-related task differentiation ($r = .31$). Both task differentiation domains were associated with the couple’s reported role dissatisfaction, though the relationship was stronger for child-related tasks ($r = .49$) than for household tasks ($r = .20$). In both domains, higher levels of task differentiation were associated with higher role dissatisfaction while less differentiation (more task sharing) was associated with less role dissatisfaction. Household task differentiation but not child-related task differentiation was significantly associated with couple’s age ($r = -.25$).
Table 4-2. Correlations among the Study’s Variables

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<td>-.41**</td>
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<td>.41**</td>
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<td>-.13</td>
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<td>11</td>
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<td>-.11</td>
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<td>.10</td>
<td>.01</td>
<td>-.02</td>
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<td>.19*</td>
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<td>.17</td>
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<td>-.13</td>
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<td>.08</td>
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<td>.03</td>
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<td>-.09</td>
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<td>-.37**</td>
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<td>15</td>
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<td>.02</td>
<td>-.24**</td>
<td>-.00</td>
<td>-.07</td>
<td>-.04</td>
<td>.37**</td>
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<td>.34**</td>
<td>-.10</td>
<td>-.41**</td>
</tr>
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<td>16</td>
<td>DSCR</td>
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<td>.10</td>
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<td>-.07</td>
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<td>-.09</td>
<td>.07</td>
<td>-.01</td>
<td>.04</td>
<td>-.15</td>
<td>-.20*</td>
<td>.12</td>
<td>.07</td>
<td>-.22*</td>
</tr>
</tbody>
</table>

Note: *p ≤ .05 (two-tailed), **p ≤ .01 (two-tailed), N = 132; TD (H) = household task differentiation, TD (C) = child-related task differentiation, RLDS = role dissatisfaction, EXP-W = wives’ violated expectations, EXP-H = husbands’ violated expectations, EXP-C = couples’ averaged violated expectations, DISAF = marital disaffection, WLB = individual well-being, AGE-C = couples’ averaged age, AGE-B = babies’ age, INC = income level, VOL = volatile couple conflict type, AVD = conflict-avoiding couple conflict type, VAL = validating couple conflict type, HSTL = hostile couple conflict type, DSCR = couple conflict type discrepancy
Younger couples reported more task differentiation whereas older couples reported more task sharing. Child-related task differentiation but not household task differentiation was significantly associated with marital disaffection ($r = .27$); couples reporting more task differentiation reported more marital disaffection.

Both the couples’ average violated expectations score ($r = -.39$) and the wives’ individual violated expectations score ($r = -.40$) were significantly correlated with child-related task differentiation but not household task differentiation; higher child-related task differentiation scores were associated with lower violated expectations scores (indicating violated expectations in the direction of wives doing more than expected). A significant relationship was also found between role dissatisfaction and both the couple’s average violated expectations ($r = -.41$) and wife’s individual violated expectations ($r = -.41$); wives individually and couples as a unit who had lower scores on the violated expectations measure (indicating wives were doing more than expected) reported more role dissatisfaction. Wives’ individual violated expectations ($r = -.19$) and couples’ average violated expectations ($r = -.22$) were related to marital disaffection, with scores indicating the wives were doing more than expected correlated with higher disaffection levels. Both husbands’ ($r = .64$) and wives’ ($r = .81$) violated expectations correlated strongly with the couple score; this was to be anticipated since the couple score is simply an average of the spouses’ scores. Besides the couple score, no other variable in the study was significantly correlated with husbands’ violated expectations scores.

Marital disaffection correlated significantly with role dissatisfaction ($r = .41$); couples reporting more disaffection also reported more role dissatisfaction. A negative correlation of -.21 was found between individual well-being and role dissatisfaction.
Couples who reported lower role dissatisfaction reported higher average levels of individual well-being in their relationship. Individual well-being was significantly and negatively associated with marital disaffection ($r = -.38$).

A number of relationships were found among the couple conflict types themselves, and between the conflict types and the study’s other variables. The validating conflict type score was significantly and negatively associated with both the volatile conflict type score ($r = -.37$) and the hostile conflict type score ($r = -.41$). The conflict-avoiding type score was negatively correlated with the volatile conflict type score ($r = -.30$). A significant positive correlation of .34 was found between the volatile conflict type score and the hostile conflict type score.

Two of the four couple conflict types were significantly correlated with role dissatisfaction. Higher hostile conflict type scores were associated with higher levels of role dissatisfaction ($r = .24$). Higher validating conflict type scores were associated with lower levels of role dissatisfaction ($r = -.30$). Only the validating conflict type score was significantly and negatively related to child-related task differentiation ($r = -.21$); couples who reported the validating type frequently represented their conflict style also reported lower scores on the child-related task differentiation. The validating and hostile scores were the only two couple conflict type scores significantly associated with marital disaffection. The validating conflict type score was negatively correlated with marital disaffection ($r = -.28$) while the hostile conflict type score was positively correlated with marital disaffection ($r = .37$). The validating conflict type score was also negatively associated with couple conflict type discrepancy ($r = -.22$). Additionally, higher role dissatisfaction was related to higher discrepancy levels for couple conflict type ($r = .22$).
In addition to older couples reporting less task differentiation (as described above), older couples also reported higher levels of marital disaffection than younger couples ($r = .30$). Couples’ age was positively correlated with infants’ age ($r = .28$). Couples’ age ($r = .38$) and infants’ age ($r = .19$) were positively correlated with income. Income level was significantly and negatively related to role dissatisfaction ($r = -.18$), as higher income levels were associated with lower role dissatisfaction. Lastly, higher income levels also correlated with lower levels of couple conflict type discrepancy ($r = -.20$).

**Research Questions**

The study’s first five research questions were answered using a stepwise multiple linear regression technique. Prior to analysis, data for all variables were checked to ensure the assumptions of regression were met. Tolerance and the variance-inflation factor (VIF) were also inspected and found to be within normal limits according to criteria noted by Tabachnick & Fidell (2001). The study’s sixth research question was answered using canonical correlation.

**Question 1:** Do task differentiation (of family household tasks and child-related tasks), violated expectations, marital disaffection, individual well-being, age, infant age, income level, and each of the couple conflict type scores (volatile, validating, conflict-avoiding, and hostile) serve as predictors of role dissatisfaction?

To answer this research question, a stepwise multiple linear regression technique was employed. The couples’ role dissatisfaction was designated as the dependent variable, and the other couple-level variables (household task differentiation, child-related task differentiation, couples’ averaged violated expectations, marital disaffection, individual well-being, age, infant age, income level, and the volatile, validating, conflict-avoiding, and hostile couple conflict type scores) were used as the independent variable
or predictor variable. There were four steps in the stepwise regression analysis, producing a final model explaining the variance in role dissatisfaction with an $R^2$ of .375. The first step in the analysis identified child-related task differentiation as a significant predictor variable ($\beta = .488, t = 6.367, p < .001$). The child-related task differentiation variable had an $R^2$ of .238 and was a significant predictor in the initial model ($F(1, 130) = 40.536, p < .001$). The second step added couples’ averaged violated expectations as a predictor in the second model ($R^2 = .294, F(1, 129) = 26.870, p < .001$), resulting in an $R^2$ change of .056. The hostile couple conflict type score was added as a third predictor in the next model resulting in an increased $R^2$ of .342 and an $R^2$ change of .048; the model continued to be significant ($F(1, 128) = 22.199, p < .001$). The fourth and final model added individual well-being as a fourth predictor of role dissatisfaction resulting in an $R^2$ of .375 and a change in the $R^2$ of .032. This model also was significant ($F(1, 127) = 19.012, p < .001$). The final model accounted for 37.5% of the variance in role dissatisfaction. The results of the stepwise regression analysis are presented in Table 4-3 and the model’s coefficients are found in Table 4-4.

Table 4-3. Role Dissatisfaction Stepwise Regression Model Summary

<table>
<thead>
<tr>
<th>Step</th>
<th>Variable</th>
<th>$R$</th>
<th>$R^2$</th>
<th>$R^2_{adj}$</th>
<th>$R^2_{chg}$</th>
<th>$F_{chg}$</th>
<th>$p$</th>
<th>$df_1$</th>
<th>$df_2$</th>
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</thead>
<tbody>
<tr>
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<td>.238</td>
<td>.232</td>
<td>.238</td>
<td>40.536</td>
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<td>130</td>
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<tr>
<td>2</td>
<td>EXP-C</td>
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<td>.294</td>
<td>.283</td>
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<td>129</td>
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<tr>
<td>3</td>
<td>HSTL</td>
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<td>.342</td>
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<td>9.371</td>
<td>&lt; .001</td>
<td>1</td>
<td>128</td>
</tr>
<tr>
<td>4</td>
<td>WLB</td>
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<td>.375</td>
<td>.355</td>
<td>.032</td>
<td>6.558</td>
<td>&lt; .001</td>
<td>1</td>
<td>127</td>
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</table>

Table 4-4. Role Dissatisfaction Model Coefficients

<table>
<thead>
<tr>
<th>Model</th>
<th>$B$</th>
<th>$\beta$</th>
<th>$t$</th>
<th>Significance</th>
</tr>
</thead>
<tbody>
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<td>TD (C)</td>
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<td>.488</td>
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<tr>
<td>2</td>
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<td>8.271</td>
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<td>TD (C)</td>
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<td>.387</td>
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Table 4-4. Continued

<table>
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<th>t</th>
<th>Significance</th>
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</thead>
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<td>HSTL</td>
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<td>Constant</td>
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<td>WLB</td>
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<td>-.182</td>
<td>-2.561</td>
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</table>

**Question 2:** Do task differentiation (of family household tasks and child-related tasks), role dissatisfaction, marital disaffection, individual well-being, age, infant age, income level, and each of the couple conflict type scores (volatile, validating, conflict-avoiding, and hostile) serve as predictors of violated expectations?

Because researchers only recently have begun examining husbands’ violated expectations, participants’ individual score (rather than the couple’s averaged score) on the violated expectations measure was designated as the dependent variable. Individual rather than couple scores were used for the set of variables comprising the independent variable (household and child-related task differentiation, role dissatisfaction, marital disaffection, individual well-being, age, infant age, income level, and the participant’s ratings of the volatile, validating, conflict-avoiding, and hostile couple conflict types). Two stepwise multiple regression analyses were completed, one for wives and one for husbands. For wives, there were two steps in the analysis, producing a final model explaining the variance in their violated expectations with an $R^2$ of .320. The first step in the analysis identified wives’ role dissatisfaction as a significant predictor variable ($\beta = -.527$, $t = -7.075$, $p < .001$). Wives’ role dissatisfaction had an $R^2$ of .278 and was a significant predictor in the initial model ($F(1, 130) = 50.060$, $p < .001$). The second step
added child-related task differentiation as a predictor in the second model ($R^2 = .320, F(1, 129) = 30.391, p < .001$), resulting in an $R^2$ change of .042. This final model explained 32% of the variance in wives’ violated expectations scores. Tables 4-5 and 4-6 present the results of the stepwise regression analysis and the model’s coefficients.

Table 4-5. Wives’ Violated Expectations Stepwise Regression Model Summary

<table>
<thead>
<tr>
<th>Step</th>
<th>Variable</th>
<th>$R$</th>
<th>$R^2$</th>
<th>$R^2_{adj}$</th>
<th>$R^2_{chg}$</th>
<th>$F_{chg}$</th>
<th>$p$</th>
<th>$df1$</th>
<th>$df2$</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>RLDS-I</td>
<td>.527</td>
<td>.278</td>
<td>.272</td>
<td>.278</td>
<td>50.060</td>
<td>&lt;.001</td>
<td>1</td>
<td>130</td>
</tr>
<tr>
<td>2</td>
<td>TD (C)-I</td>
<td>.566</td>
<td>.320</td>
<td>.310</td>
<td>.042</td>
<td>8.020</td>
<td>&lt;.001</td>
<td>1</td>
<td>129</td>
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</tbody>
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Table 4-6. Wives’ Violated Expectations Model Coefficients

<table>
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<th>Model</th>
<th>$B$</th>
<th>$\beta$</th>
<th>$t$</th>
<th>Significance</th>
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</thead>
<tbody>
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<tr>
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<td>-.393</td>
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<td>TD (C)-I</td>
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<td>-.245</td>
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</table>

There were also two steps in the stepwise regression analysis predicting husbands’ violated expectations. The first step in the analysis identified individual well-being as a significant predictor variable ($\beta = .225, t = 2.630, p = .010$). The individual well-being variable had an $R^2$ of .051 and was a significant predictor in the initial model ($F(1, 130) = 6.918, p = .010$). Husbands’ individual score on the volatility scale of the couple conflict type measure was added as a predictor in the second model, resulting in an $R^2$ of .091, and an $R^2$ change of .041 over the first model. This final model was significant ($F(1, 129) = 6.466, p = .002$); however, it only accounted for 9.1% of the variance in husbands’ violated expectations. The results of the stepwise regression analysis are presented in Table 4-7 and the model’s coefficients are found in Table 4-8.

Table 4-7. Husbands’ Violated Expectations Stepwise Regression Model Summary

<table>
<thead>
<tr>
<th>Step</th>
<th>Variable</th>
<th>$R$</th>
<th>$R^2$</th>
<th>$R^2_{adj}$</th>
<th>$R^2_{chg}$</th>
<th>$F_{chg}$</th>
<th>$p$</th>
<th>$df1$</th>
<th>$df2$</th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>WLB-I</td>
<td>.225</td>
<td>.051</td>
<td>.043</td>
<td>.051</td>
<td>6.918</td>
<td>.010</td>
<td>1</td>
<td>130</td>
</tr>
<tr>
<td>2</td>
<td>VOL-I</td>
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<td>.091</td>
<td>.077</td>
<td>.041</td>
<td>5.761</td>
<td>.002</td>
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Table 4-8. Husbands’ Violated Expectations Model Coefficients

<table>
<thead>
<tr>
<th>Model</th>
<th>B</th>
<th>β</th>
<th>t</th>
<th>Significance</th>
</tr>
</thead>
<tbody>
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<td>WLB-I</td>
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<td>-2.630</td>
<td>.010</td>
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<tr>
<td>2</td>
<td>Constant</td>
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<td>-2.199</td>
<td>.030</td>
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<td></td>
<td>WLB-I</td>
<td>.015</td>
<td>-2.479</td>
<td>.014</td>
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<tr>
<td></td>
<td>VOL-I</td>
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<td>-2.400</td>
<td>.018</td>
</tr>
</tbody>
</table>

**Question 3:** Do task differentiation (of family household tasks and child-related tasks), role dissatisfaction, violated expectations, individual well-being, age, infant age, income level, and each of the couple conflict type scores (volatile, validating, conflict-avoiding, and hostile) serve as predictors of marital disaffection?

A stepwise multiple regression was conducted with marital disaffection designated as the dependent variable, and the set of couple-level variables (household task differentiation, child-related task differentiation, role dissatisfaction, couples’ averaged violated expectations, individual well-being, age, infant age, income level, and the volatile, validating, conflict-avoiding, and hostile couple conflict type scores) designated as the independent variable. There were six steps in the stepwise regression analysis, producing a final model accounting for variance in marital disaffection with an $R^2$ of .417. The first step in the analysis identified role dissatisfaction as a significant predictor variable ($\beta = .406, t = 5.063, p < .001$). The role dissatisfaction variable had an $R^2$ of .165 and was a significant predictor in the initial model ($F (1, 130) = 25.637, p < .001$). The couple’s average age was added as a predictor in the second model resulting in an increased $R^2$ of .260 and an $R^2$ change of .095; the model continued to be significant ($F (1, 129) = 22.686, p < .001$). The third step added couples’ individual well-being as a predictor in the third model ($R^2 = .327, F (1, 128) = 20.732, p < .001$), resulting in an $R^2$ change of .067 over the second model. The hostile couple conflict type score was added
as a predictor in the fourth model, resulting in an $R^2$ of .374 ($R^2_{chg} = .047$, $F(1, 127) = 19.006, p < .001$). Child-related task differentiation was added as a predictor variable in the fifth model, producing an $R^2$ of .396 and an $R^2$ change of .021 over the fourth model ($F(1, 126) = 16.509, p < .001$). The sixth and final step added the volatile couple conflict type score as a predictor of marital disaffection resulting in an $R^2$ of .417 and a change in the $R^2$ of .021 over the fifth model. This final model also was significant ($F(1, 129) = 22.686, p < .001$) and explained 41.7% of the variance in marital disaffection. The results of the stepwise regression analysis are presented in Table 4-9 and the model’s coefficients are found in Table 4-10.

### Table 4-9. Marital Disaffection Stepwise Regression Model Summary

<table>
<thead>
<tr>
<th>Step</th>
<th>Variable</th>
<th>$R$</th>
<th>$R^2$</th>
<th>$R^2_{adj}$</th>
<th>$R^2_{chg}$</th>
<th>$F_{chg}$</th>
<th>$p$</th>
<th>$df_1$</th>
<th>$df_2$</th>
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</thead>
<tbody>
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<td>.158</td>
<td>.165</td>
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<td>130</td>
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<td>.249</td>
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<tr>
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<td>.374</td>
<td>.355</td>
<td>.047</td>
<td>9.633</td>
<td>&lt;.001</td>
<td>1</td>
<td>127</td>
</tr>
<tr>
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<td>.372</td>
<td>.021</td>
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<td>126</td>
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### Table 4-10. Marital Disaffection Model Coefficients

<table>
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<th>Model</th>
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<th>$\beta$</th>
<th>$t$</th>
<th>Significance</th>
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<tr>
<td></td>
<td>AGE-C</td>
<td>.453</td>
<td>.309</td>
<td>4.080</td>
</tr>
<tr>
<td>3</td>
<td>Constant</td>
<td>20.946</td>
<td></td>
<td>3.914</td>
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<tr>
<td></td>
<td>RLDS</td>
<td>1.727</td>
<td>.360</td>
<td>4.846</td>
</tr>
<tr>
<td></td>
<td>AGE-C</td>
<td>.393</td>
<td>.268</td>
<td>3.650</td>
</tr>
<tr>
<td></td>
<td>WLB</td>
<td>-1.157</td>
<td>-.267</td>
<td>-3.565</td>
</tr>
<tr>
<td>4</td>
<td>Constant</td>
<td>18.762</td>
<td></td>
<td>3.589</td>
</tr>
<tr>
<td></td>
<td>RLDS</td>
<td>1.486</td>
<td>.310</td>
<td>4.202</td>
</tr>
<tr>
<td></td>
<td>AGE-C</td>
<td>.357</td>
<td>.244</td>
<td>3.405</td>
</tr>
<tr>
<td></td>
<td>WLB</td>
<td>-1.144</td>
<td>-.245</td>
<td>-3.349</td>
</tr>
<tr>
<td></td>
<td>HSTL</td>
<td>2.175</td>
<td>.227</td>
<td>3.104</td>
</tr>
</tbody>
</table>
Question 4: Do task differentiation (of family household tasks and child-related tasks), role dissatisfaction, violated expectations, marital disaffection, age, infant age, income level, and each of the couple conflict type scores (volatile, validating, conflict-avoiding, and hostile) serve as predictors of individual well-being?

A stepwise multiple regression analysis was conducted to answer this research question, with couples’ individual well-being score designated as the dependent variable and the set of couple-level variables (household task differentiation, child-related task differentiation, role dissatisfaction, couples’ averaged violated expectations, marital disaffection, age, infant age, income level, and the volatile, validating, conflict-avoiding, and hostile couple conflict type scores) designated as the independent variable. The first and only step in the stepwise regression analysis identified marital disaffection as a significant predictor variable ($\beta = -0.381, t = -4.698, p < .001$). The marital disaffection variable had an $R^2$ of .145, and the model was significant ($F(1, 130) = 22.075, p < .001$). Marital disaffection explained 14.5% of the variance in couples’ individual well-being.
The results of the regression analysis are presented in Table 4-11 and the model’s coefficients are found in Table 4-12.

Table 4-11. Individual Well Being Stepwise Regression Model Summary

<table>
<thead>
<tr>
<th>Step</th>
<th>Variable</th>
<th>R</th>
<th>( R^2 )</th>
<th>( R^2_{adj} )</th>
<th>( R^2_{chng} )</th>
<th>( F_{chng} )</th>
<th>p</th>
<th>df1</th>
<th>df2</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>DISAF</td>
<td>.381</td>
<td>.145</td>
<td>.139</td>
<td>.145</td>
<td>22.075</td>
<td>&lt; .001</td>
<td>1</td>
<td>130</td>
</tr>
</tbody>
</table>

Table 4-12. Individual Well Being Model Coefficients

<table>
<thead>
<tr>
<th>Model</th>
<th>B</th>
<th>( \beta )</th>
<th>t</th>
<th>Significance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Constant</td>
<td>88.389</td>
<td>21.023</td>
<td>&lt; .001</td>
</tr>
<tr>
<td>DISAF</td>
<td>-.648</td>
<td>-.381</td>
<td>-4.698</td>
<td>&lt; .001</td>
</tr>
</tbody>
</table>

**Question 5:** Do task differentiation (of family household tasks and child-related tasks), role dissatisfaction, violated expectations, marital disaffection, individual well-being, age, infant age, and income level predict the couple conflict type discrepancy score?

A final stepwise regression analysis was conducted, designating the couple conflict type discrepancy score as the dependent variable and the set of couple-level variables (household task differentiation, child-related task differentiation, role dissatisfaction, couples’ averaged violated expectations, marital disaffection, individual well-being, age, infant age, and income level) as the independent or predictor variable. The first and only step in the stepwise regression analysis identified role dissatisfaction as a significant predictor variable (\( \beta = .220, t = 2.573, p = .011 \)). The role dissatisfaction variable had an \( R^2 \) of .048, and the model was significant (\( F(1, 130) = 6.621, p = .011 \)). Role dissatisfaction explained only 4.8% of the variance in the couple conflict type discrepancy score. The results of the regression analysis are presented in Table 4-13 and the model’s coefficients are found in Table 4-14.
Question 6: Is there a relationship between the set of variables (task differentiation of family household tasks and child-related tasks, violated expectations, role dissatisfaction, marital disaffection, individual well-being, age, infant age, and income level) and the set of couple conflict type variables (volatile type score, validating type score, conflict-avoiding type score, and hostile type score)?

This final research question was answered through a canonical correlation procedure. The analysis examined the relationship between the explanatory variable set (household task differentiation, child-related task differentiation, role dissatisfaction, couples’ averaged violated expectations, marital disaffection, individual well-being, age, infant age, and income level) and the outcome variable set (the volatile, validating, conflict-avoiding, and hostile couple conflict type scores). The canonical correlation analysis produced four canonical variates describing the relationship between the explanatory set and the outcome set. Multivariate F test approximations tested a null hypothesis that all the canonical correlations were equal to zero. The results supported the rejection of this null hypothesis, and can be found in Table 4-15.

Table 4-13. Couple Conflict Type Discrepancy Stepwise Regression Model Summary

<table>
<thead>
<tr>
<th>Step</th>
<th>Variable</th>
<th>$R$</th>
<th>$R^2$</th>
<th>$R^2_{adj}$</th>
<th>$R^2_{chg}$</th>
<th>$F_{chg}$</th>
<th>$p$</th>
<th>df1</th>
<th>df2</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>RLDS</td>
<td>.220</td>
<td>.048</td>
<td>.041</td>
<td>.048</td>
<td>6.621</td>
<td>.011</td>
<td>1</td>
<td>130</td>
</tr>
</tbody>
</table>

Table 4-14. Couple Conflict Type Discrepancy Model Coefficients

<table>
<thead>
<tr>
<th>Model</th>
<th>$B$</th>
<th>$\beta$</th>
<th>$t$</th>
<th>Significance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Constant</td>
<td>2.057</td>
<td>4.665</td>
<td>&lt; .001</td>
</tr>
<tr>
<td></td>
<td>RLDS</td>
<td>.242</td>
<td>.220</td>
<td>2.573</td>
</tr>
</tbody>
</table>

Table 4-15. Multivariate F Test Approximations

<table>
<thead>
<tr>
<th>Statistic</th>
<th>$F$ value</th>
<th>$df$</th>
<th>$pr &gt; F$</th>
</tr>
</thead>
<tbody>
<tr>
<td>Wilks’ Lambda</td>
<td>1.80</td>
<td>36, 447.69</td>
<td>.004</td>
</tr>
<tr>
<td>Pillai’s Trace</td>
<td>1.72</td>
<td>36, 488</td>
<td>.007</td>
</tr>
<tr>
<td>Hotelling-Lawley Trace</td>
<td>1.88</td>
<td>36, 311.67</td>
<td>.002</td>
</tr>
<tr>
<td>Roy’s Greatest Root</td>
<td>5.33</td>
<td>9, 122</td>
<td>&lt; .001</td>
</tr>
</tbody>
</table>
Of the four canonical variates, the first canonical correlation was .531 (28.2% over-lapping variance), the second was .312 (9.7% over-lapping variance), the third was .219 (4.8% over-lapping variance), and the fourth was .152 (2.3% over-lapping variance). The correlations and coefficients for these four variates are presented in Table 4-16. The first canonical correlation represents the highest possible correlation between the linear combination of the explanatory variables and the linear combination of the outcome variables, and was the only statistically significant canonical variate \( (F(36, 447.69) = 1.80, p = .004) \). It produced an Eigenvalue of .393, explaining 68.4% of the variance in the data. A graph illustrating the first canonical variate is presented in Figure 4-1. The first canonical correlation of .531 indicates the presence of a moderately strong relationship between the explanatory set and the outcome set of variables. Using a cutoff correlation of .3, the couple-level variables in the explanatory set most strongly associated with the first canonical variate were marital disaffection (.837), infants’ age (.480), the couple’s average age (.471), role dissatisfaction (.411), and individual well-being (-.378). The couple conflict type scores in the outcome set most highly correlated with the first canonical variate were the hostile couple conflict type score (.757) and the validating couple conflict type score (-.576).

**Summary**

In this chapter, the results of a survey of couples who recently transitioned to parenthood were presented. Descriptive statistics for the study’s research variables and correlations between the variables were explained and discussed. The study’s research questions were answered by detailing the results of the data analyses. In chapter 5, the results will be discussed along with implications for theory, counseling practice, policy, and future research.
Table 4-16. Canonical Correlations, Coefficients, and Redundancy Indices for Couple Conflict Types and Explanatory Variables

<table>
<thead>
<tr>
<th>Outcome Set</th>
<th>First Canonical Variate</th>
<th>Second Canonical Variate</th>
<th>Third Canonical Variate</th>
<th>Fourth Canonical Variate</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Correlation</td>
<td>Coefficient</td>
<td>Correlation</td>
<td>Coefficient</td>
</tr>
<tr>
<td>VOL</td>
<td>-.173</td>
<td>-.677</td>
<td>.550</td>
<td>.590</td>
</tr>
<tr>
<td>VAL</td>
<td>-.576</td>
<td>-.500</td>
<td>-.724</td>
<td>-.701</td>
</tr>
<tr>
<td>AVD</td>
<td>-.076</td>
<td>-.163</td>
<td>.346</td>
<td>.574</td>
</tr>
<tr>
<td>HSTL</td>
<td>.757</td>
<td>.770</td>
<td>.087</td>
<td>-.340</td>
</tr>
<tr>
<td>Percent of variance</td>
<td>.235</td>
<td>.238</td>
<td>.262</td>
<td>.264 Total = 1.000</td>
</tr>
<tr>
<td>Redundancy</td>
<td>.066</td>
<td>.023</td>
<td>.013</td>
<td>.006 Total = .108</td>
</tr>
<tr>
<td>Explanatory Set</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>TD (H)</td>
<td>-.164</td>
<td>-.064</td>
<td>.123</td>
<td>-.267</td>
</tr>
<tr>
<td>TD (C)</td>
<td>.071</td>
<td>-.098</td>
<td>.757</td>
<td>.654</td>
</tr>
<tr>
<td>RLDS</td>
<td>.411</td>
<td>.321</td>
<td>.745</td>
<td>.598</td>
</tr>
<tr>
<td>EXP-C</td>
<td>-.021</td>
<td>.235</td>
<td>-.327</td>
<td>.048</td>
</tr>
<tr>
<td>DISAF</td>
<td>.837</td>
<td>.726</td>
<td>.110</td>
<td>-.407</td>
</tr>
<tr>
<td>WLB</td>
<td>-.378</td>
<td>-.003</td>
<td>-.241</td>
<td>-.318</td>
</tr>
<tr>
<td>AGE-C</td>
<td>.471</td>
<td>.093</td>
<td>-.132</td>
<td>-.037</td>
</tr>
<tr>
<td>AGE-B</td>
<td>.480</td>
<td>.392</td>
<td>-.337</td>
<td>-.244</td>
</tr>
<tr>
<td>INC</td>
<td>.234</td>
<td>.126</td>
<td>-.133</td>
<td>.084</td>
</tr>
<tr>
<td>Percent of variance</td>
<td>.172</td>
<td>.163</td>
<td>.098</td>
<td>.103 Total = .536</td>
</tr>
<tr>
<td>Redundancy</td>
<td>.049</td>
<td>.016</td>
<td>.005</td>
<td>.002 Total = .072</td>
</tr>
</tbody>
</table>

Canonical correlation .531 .312 .219 .152
Figure 4-1. Plot of First Canonical Variate. A = 1 observation, B = 2 observations
CHAPTER 5
DISCUSSION

Becoming a parent and raising a child, though a normative event in the family life cycle, may be among life’s most challenging, joyous, and transforming processes. Because most experience new parenthood along with a partner, relationships are the crucible in which these challenges, joys, and transformations occur. Therefore, in our attempts to understand and ease the transition to parenthood, it is critical to better comprehend the couple’s relationship. A goal of the present study was to explore relational factors associated with new parenthood, including partners’ role arrangements and satisfaction concerning household and child-related tasks. The extent to which partners’ expectations about these roles were met or violated was also investigated. The study examined the marital disaffection and individual well-being among new parents. Lastly, the type of couple conflict behavior characteristic of the couple’s relationship was explored. Attaining a better understanding of new parents’ patterns of conflict interaction was expected to provide insight into how couples might negotiate their family roles to their individual and relational benefit.

In this chapter, the study’s variables and design are reviewed, and the findings are discussed. Limitations of the study are also detailed. Finally, implications for policy, counseling practice, theory, and future research are presented.

Overview of the Study

This study of first-time parents included 132 married couples whose infants ranged in age from 1.54 months to 13.98 months. The couples in the sample had been married an
average of 4.23 years, with marriage length among the participants ranging from approximately two weeks to over 15 years. Spouses each completed a survey composed of instruments measuring (a) the type of couple conflict behavior typical in the relationship, (b) the extent to which violated expectations about housework and child care were present, (c) the couple’s division of household labor, specifically the degree of role differentiation in partners’ completion of household and child care tasks, (d) partners’ level of dissatisfaction with their family roles, (e) partners’ level of marital disaffection, and (f) partners’ levels of individual well-being. Couple scores were computed for each of the study’s variables, allowing investigation of the variables’ relationships across couples for most of the research questions rather than only examining the findings for mothers and fathers as separate groups.

Discussion of the Study’s Findings

Predictors of Couples’ Dissatisfaction with Their Parenting and Household Roles

The first research question posed in the present study inquired about the relationship between the couple’s level of role dissatisfaction and several couple-level variables (including task differentiation, the extent of violated expectations, marital disaffection, individual well-being, couple conflict type, age, infant age, and income). The stepwise multiple regression analysis revealed four significant predictors of role dissatisfaction. The most significant predictor was child-related task differentiation, followed by the couple’s averaged violated expectations score, the hostile couple conflict type score, and the couples’ level of individual well-being. Together these four variables accounted for 37.5% of the variance in role satisfaction.

The role dissatisfaction measure asked participants to rate their satisfaction with both their family/household roles and their parenting roles, and in fact role dissatisfaction
was significantly correlated with task differentiation scores for the domains of both household tasks and child-related tasks. However, child-related task differentiation and not household task differentiation was identified as a significant predictor of role dissatisfaction in the stepwise regression. Findings from previous research studies provide some indication why child-related tasks may be of more significance. In Fox’s (2001) qualitative study, women prioritized their husbands’ relationship with their babies over their husbands’ contribution to housework. Men’s participation in child-related tasks may signify a stronger relationship between fathers’ and their infants and may thus be more important to the couples than their division of household tasks. Additionally, women in Goodnow’s (1998) investigation perceived their division of labor as more fair when their partners completed traditionally female tasks, suggesting the men were more appreciative and understanding of the women’s typical contributions. In the current study, the household task differentiation scale was relatively balanced with items assessing traditionally “male” and “female” tasks, whereas all of the child-related task items could be considered traditionally “female” tasks; therefore the child-related domain could have a stronger impact on role satisfaction scores than the more balanced household-related domain. In the present study, couples with higher reported task differentiation involving the care of their child reported more dissatisfaction with their family roles. This outcome reflects findings in previous research that both mothers and fathers would like fathers to be more involved in parenting than they actually are (Backett, 1982; Cook et al., 2005; Hiller & Philliber, 1986; Reichle & Gefke, 1998; Thompson & Walker, 1989; Van Egeren, 2004).
Couples’ averaged violated expectations comprised a second predictor of role dissatisfaction. Couples’ lower scores on the violated expectations measure (indicating the spouses’ beliefs the wives were doing more housework and child care compared to the husbands than the partners had expected) predicted more role dissatisfaction. Unlike previous longitudinal studies which inquired about expectations during pregnancy and then measured the couple’s actual division of labor after the baby’s arrival, the present investigation was limited to a retrospective assessment of expectations. However, of note in the present study, couples who recalled expectations that housework and child care would be shared more equally or that fathers would be more involved than they actually were reported higher role dissatisfaction. This finding is in line with what has been found in the longitudinal studies (C. P. Cowan & Cowan, 1988; Hackel & Ruble, 1992; Ruble et al., 1988; Van Egeren, 2004). However, similar to Grote and Clark’s (2001) investigation of perceived unfairness and marital satisfaction, it is possible couples who are more dissatisfied with their current roles may be more prone to believing they had expected their roles to be different from what actually emerged.

Higher scores on the hostile couple conflict type scale also predicted higher levels of role dissatisfaction. Although higher scores on the validating couple conflict type scale were significantly correlated with lower levels of role dissatisfaction, this variable did not enter the regression model as a significant predictor, suggesting the validating type variable did not significantly account for the variance in role dissatisfaction after other variables related to the validating type were entered into the model (e.g., child-related task differentiation, which was significantly and negatively correlated with the validating score). Gottman (1994) noted each of the three regulated couple conflict types
(validating, volatile, and conflict-avoiding) are associated with marital stability and satisfaction. While none of the three regulated types entered the model as a significant predictor of low role dissatisfaction, the hostile couple conflict type was the only type predicting high role dissatisfaction. This suggests that although couples may be approaching negotiation of household and parenting roles with different conflict styles, they are relatively similar in their ability to negotiate roles they find satisfactory. The validating couples may have somewhat of an advantage in this regard as their couple conflict type was the only one significantly related to low role dissatisfaction in the correlation matrix. This finding is similar to Holman and Jarvis’s study (2003), in which the validating type was usually more strongly associated with positive outcomes than the other two regulated types, although the volatile and conflict-avoiding types were still more often associated with positive rather than negative outcomes.

Lastly, higher individual well-being was found to be a predictor of lower role dissatisfaction. This finding suggests that in addition to relationship factors, the welfare of the individuals in the relationship is associated with how satisfied partners are with their roles. In addition to or despite how the couple actually shares family tasks, each partner’s level of anxiety, depression, or positive well-being may influence how satisfied they feel with their current role arrangements.

Predictors of Wives’ and Husbands’ Levels of Violated Expectations

Predictors of wives’ and husbands’ levels of violated expectations were investigated through the second research question of this study. For both partners, task differentiation, role dissatisfaction, marital disaffection, the level of individual well-being, couple conflict type, age, infant age, and income level were entered into stepwise regression analyses as possible predictors. However, the results of the regression were
quite different for the women and men in the study. For the wives, role dissatisfaction was identified as the most significant predictor of violated expectations. Lower role dissatisfaction was associated with less violated expectations (where the couple’s actual levels of sharing housework and child care matched the wives’ previously-held expectations, or the husbands’ involvement exceeded expectations); higher role dissatisfaction was associated with scores on the violated expectations measure indicating wives were doing proportionally more than they had expected.

Child-related task differentiation was a second significant predictor of wives’ level of violated expectations. Again, higher levels of task differentiation for child-related tasks, but not household tasks, were associated with wives’ reports that, compared to their husbands, they were doing more housework and child care than they expected. This result differed somewhat from the outcome of Ruble and her associates’ (1988) study, in which the division of labor in terms of housework was a stronger determinant of violated expectations than child care; however Ruble and her co-authors suggested the division of labor for child care may become more salient as the couple progresses further through the transition to parenthood, noting their investigation only followed couples for the first three months post-partum.

Interestingly in the regression, role dissatisfaction was identified as a more significant predictor of wives’ violated expectations level than the couples’ actual division of labor (task differentiation). This is in line with previous research demonstrating that women with traditional gender role ideologies were more satisfied when they actually did more than they had expected they would be doing (Goldberg & Perry-Jenkins, 2004; Hackel & Ruble, 1992). If wives are satisfied with their roles, they
may recall expectations more in line with what is actually occurring with their division of labor; the actual level of task differentiation, as reported by the wives, was still an important predictor (at least for child-related tasks) but was secondary to how satisfied or dissatisfied the wives were with their current roles. These two variables, role dissatisfaction and child-related task differentiation, accounted for 32% of the variance in wives’ violated expectations scores.

For husbands, individual well-being was identified in the analysis as a significant predictor of their violated expectations score. Husbands’ higher levels of individual well-being were associated with violated expectations scores indicating the partners’ actual involvement met the expectations husbands had formed while their wives were still pregnant, or that the husbands were more involved in housework and child care than they had expected to be. Previous research similarly found when men contributed less to housework and child care than they had expected, they reported higher rates of depression (Strazdins et al., 1997). It may be husbands who have a more positive sense of well-being are better able to be involved in housework and child care. It may also be that husbands who meet or exceed their own expectations for involvement in these roles experience a heightened sense of positive well-being as a result, while those who do not meet or surpass their expectations for involvement go on to experience more feelings of anxiety and depression. This would fit with Hawkins and Roberts’ (1992) suggestion that men may experience cognitive dissonance if they do not measure up to the new ideology of involved fatherhood.

A second predictor of husbands’ violated expectations scores was their rating of how well the volatile couple conflict type represented the couple’s usual conflict style.
Husbands’ higher scores on the volatile couple conflict type scale predicted lower scores on the violated expectations measure (indicating the husbands were completing a smaller proportion of housework and child care than they had expected they would). Although the volatile type score was not significantly associated with violated expectations in the correlation matrix, it provided a unique contribution to the explanation of variance in husbands’ violated expectations. This result was unanticipated, inspiring some speculation. It could be that the volatile type couples have a more difficult time translating their expectations into practice. Alternatively, violated expectations may have led to increased conflict in the relationship, which husbands interpreted as volatility. Of note, men’s level of individual well-being and the volatile couple conflict type score entered the final stepwise regression model to predict husbands’ violated expectations, but explained only 9.1% of the variance. This is especially interesting since compared to wives’ mean score on the violated expectations scale, husbands’ average score on the measure indicated a stronger belief that the wives were doing proportionately more than had been expected. Despite this higher level of violated expectations, none of the study’s variables accounted for much of the variance in husbands’ scores. Other factors seem to be influencing this score. It could be that while husbands are aware of the fact their wives are doing comparatively more than either partner had expected them to do, they are not as impacted because the inequality is in their favor. In contrast, wives have more negative outcomes associated with their violated expectations and the inequality, (including lower role satisfaction and more responsibility for completing child-related tasks), perhaps causing this factor to be more relevant for the women in the study.
Predictors of Couples’ Marital Disaffection

The stepwise multiple regression analysis identified six predictors of marital disaffection from among the study’s couple-level variables, ultimately producing a model accounting for 41.7% of the variance in marital disaffection scores. Scores on the role dissatisfaction measure comprised the first significant predictor, with higher levels of role dissatisfaction associated with higher levels of marital disaffection. In contrast, couples who were more satisfied with their household and parenting roles were also happier with their marriages.

Age was identified as a second predictor, with older couples reporting more marital disaffection than younger couples. This finding did not seem to be a function of time married, as the couples’ marriage length did not significantly correlate with disaffection. This relationship was unexpected, although some conjectures can be formed in an attempt to explain it. Fox (2001) noted wives’ increased isolation and dependence on their husbands upon transitioning to parenthood were related to wives’ hesitancy to engage their husbands in conflicts. Older parents may have stronger social networks and be less dependent on their spouses for financial and emotional support, permitting them to be less cautious, less dependent, and more confrontational. Additionally, older parents may have a more established sense of themselves and their roles than younger parents, causing the addition of an infant to the family and subsequent changing roles to feel more destabilizing; hence older parents may have more difficulty than younger parents in accommodating to new roles and the changing needs of their spouse than younger parents.

Individual well-being entered the regression model as a third predictor, with higher levels of individual well-being associated with lower levels of marital disaffection.
Couples in which the partners had lower levels of depression and anxiety, and higher levels of positive well-being, were also couples who had more affectionate and satisfying marriages.

Not surprisingly, higher scores on the hostile couple conflict type scale predicted higher levels of marital disaffection. This is in line with Gottman’s (1994) theory and research as well as Holman and Jarvis’s (2003) findings, where the hostile couple conflict type was consistently associated with lower marital satisfaction and stability. Cowan and her associates’ (1985) research uncovered a relationship between increasing conflict over the transition to parenthood and decreasing marital satisfaction. The results from the current investigation raise the question whether increases in all types of conflict over the transition to parenthood would be associated with negative marital outcomes, or whether only negative (hostile) conflict interactions would be related to dissatisfaction. More recent studies also suggest constructive conflict engagement may be related to positive marital outcomes (Heinicke & Guthrie, 1996; Paley et al., 2005).

Child-related task differentiation was a fifth predictor in the model; higher scores on this measure were associated with higher levels of marital disaffection. Couples in which mothers and fathers took on highly differentiated roles in caring for their baby were also couples who were less happy with their marriages. This is similar to findings in several other studies (C. P. Cowan & Cowan, 1988; Cowan & Cowan, 2000; Cowan et al., 1985; Grote & Clark, 2001; Hackel & Ruble, 1992; Hock et al., 1995; Lewis, 1989). Again, it was only child-related task differentiation, not household task differentiation, that was associated with the level of marital disaffection. For nearly every couple in the sample, child-related tasks were skewed toward mothers completing the majority of these
tasks; individuals’ ratings across all of the child-related task items showed participants reported fathers doing more for 8% of the items, mothers doing more for 62% of the items, and equal sharing of child-related tasks for 30% of the items. It appears fathers’ relative lack of involvement may lead to less positive marital outcomes, as has been established in previous research involving mothers (C. P. Cowan & Cowan, 1988; Cowan & Cowan, 2000; Hackel & Ruble, 1992; Ruble et al., 1988). It may also be that less happy marriages lead fathers to participate less in caring for their child, as has been a more typical finding for fathers reported in the existing research (Belsky & Kelly, 1994; Paley et al., 2005; Shapiro, 2005; Van Egeren, 2004).

Interestingly, child-related task differentiation was identified as a significant predictor of marital disaffection in the regression analysis while violated expectations were not. (Violated expectations were correlated with disaffection, however.) Numerous other studies have found violated expectations to be more strongly associated with marital dissatisfaction than the couples’ actual division of labor (Cowan & Cowan, 2000; Goldberg & Perry-Jenkins, 2004; Hackel & Ruble, 1992; Kalmuss et al., 1992; Pancer & Pratt, 2000; Ruble et al., 1988). This difference may be due to the marital outcome measure used in the present study, which assessed disaffection rather than dissatisfaction. Marital disaffection is a gradual process involving the deterioration of caring and attachment in a relationship, perhaps through the accumulation of various disappointments and conflicts (Kayser, 1996). While violated expectations may signify a disappointment in the marriage, these disappointments are only starting to accrue during the first year after the birth of the couple’s child. Although violated expectations may be
strongly associated with dissatisfaction, their influence on disaffection may take longer to appear.

The last variable entering the regression model was the couple’s score on the volatile couple conflict type scale, with higher scores predicting lower levels of marital disaffection. Although the validating type score was the only couple conflict type negatively correlated with marital disaffection at a statistically significant level, it was not a significant predictor in the stepwise regression analysis. Presumably, it did not provide a unique contribution to the variance in disaffection since it was correlated with other predictor variables. The volatile type score, on the other hand, was not significantly associated with disaffection in the correlation matrix, yet provided a unique contribution to the explanation of variance in marital disaffection scores. This predictive value of the volatile couple conflict type score is in line with Gottman’s (1994) theory and research; volatile couples have high conflict engagement, but are also passionate in their conflict resolutions and intimate in their general interactions. Since volatile couples tend to be more affectionate than conflict-avoiding or validating couples, it makes sense this couple conflict type would be predictive of lower levels of disaffection.

Overall, the average level of marital disaffection was low for this sample. This may reflect the fact that marital disaffection is a stronger sign of relational distress than marital dissatisfaction, representing an accumulation of specific dissatisfactions over time. Since the average marriage length for this sample was only 4.23 years, marital disaffection may not have had much time to develop.

Predictors of the Levels of Individual Well-Being Present in the Couple’s Relationship

In examining individual well-being, all of the couple-level variables were entered into the model as possible predictors (including task differentiation, role dissatisfaction,
violated expectations, marital disaffection, the couple conflict type scores, age, infant age, and income level). Only marital disaffection emerged as a significant predictor of individual well-being, explaining 14.5% of the variance. This finding is especially interesting when compared to the numerous variables identified through the stepwise regression models accounting for 41.7% of the variance in marital disaffection. It appears variables associated with the couple’s division of labor (including higher levels of task differentiation and role dissatisfaction) and variables associated with the couple’s conflict behaviors (including higher reliance on the hostile couple conflict type and lower endorsement of the volatile couple conflict type) are more strongly associated with the level of marital disaffection than they are with the overall level of individual well-being present in the couple’s relationship. It seems instead that marital disaffection is affected first by these factors, and only secondly does disaffection impact individual well-being, indicating couples may view conflict and their division of labor as relational rather than individual issues.

Unlike the present investigation, other studies have found links between the division of labor and new parents’ well-being; in particular, men’s lower involvement in housework and child care has been associated with both men and women’s depression (Blair & Hardesty, 1994; Ruble et al., 1988; Strazdins et al., 1997). Because the present study’s variables accounted for relatively little of the variance in individual well-being, other factors not measured in this study are likely to be important predictors of the overall welfare of the individuals in these marriages.

Predictors of Discrepancies in Partners’ Couple Conflict Type Ratings

The stepwise regression analysis identified role dissatisfaction as the only significant predictor of discrepancies in partners’ couple conflict type ratings. It makes
sense that couples who were less satisfied with their household/family and child-related role arrangements would also be couples who had less agreement about their typical style of resolving conflicts. Partners who do not have an accurate sense of how they approach conflicts together, or who have differing preferences for how to approach conflict, are likely to be less effective at producing satisfying outcomes from their negotiations, including the negotiation of satisfying role arrangements. However, the role dissatisfaction measure only explained 4.8% of the variance in the couple conflict type discrepancy scores. It appears factors not included in this investigation are more strongly related to this discrepancy.

Gottman (1994) found couple conflict type “mismatches” to be highly predictive of negative marital outcomes, such as dissatisfaction and destructive conflict patterns. He hypothesized that the hostile couple conflict type may represent a couple’s inability to agree on one of the three regulated conflict types due to differing preferences. It is therefore somewhat surprising that the couple conflict type discrepancy score calculated for this investigation was not significantly associated with most of the study’s variables. However, the participants in this study were asked to rate how frequently their conflicts matched those described in a depiction of each of the couple conflict types, not how they would prefer their conflict interactions to be. Discrepancies were therefore based on differences in partners’ perceptions of their conflict interactions rather than differences in their preferences. Future research assessing partners’ preferences regarding the couple conflict types in addition to their typical conflict interaction styles may be of more value.

**Associations between Couple Conflict Types and the Couple-Level Variables**

A canonical correlation procedure was conducted to test the relationships between the couple conflict types (volatile, conflict-avoiding, validating, and hostile) and the
study’s couple-level variables (household task differentiation, child-related task
differentiation, role dissatisfaction, violated expectations, marital disaffection, individual
well-being, age, infant age, and income level). A moderately strong relationship was
found, with a canonical correlation of .531 (28.2% overlapping variance). Among the
explanatory set, marital disaffection was the strongest contributor to the canonical
variate, while infants’ age, the couple’s average age, role dissatisfaction, and individual
well-being also contributed significantly to the canonical correlation. In the outcome set,
the hostile and validating couple conflict type scores were the strongest contributors to
the canonical variate. Therefore, in general, couples with higher scores on the hostile
couple conflict scale and lower ratings on the validating couple conflict scale also had
higher marital disaffection, were more likely to have an older baby, were older, had more
role dissatisfaction, and had lower individual well-being. In contrast, couples with higher
ratings on the validating couple conflict scale and lower ratings on the hostile couple
conflict scale were more likely to have lower levels of marital disaffection, to have a
younger baby, to be a younger couple, to have lower role dissatisfaction, and to have
higher individual well-being.

Several of these associations are in line with Gottman’s (1994) theory and research
and Holman and Jarvis’s (2003) findings. The hostile couple conflict type, but none of
the three regulated types, was related to more negative outcomes (higher marital
disaffection and role dissatisfaction, and lower individual well-being). In contrast, the
three regulated types were associated with more positive outcomes (lower marital
disaffection and role dissatisfaction, and higher individual well-being), although this
association was only statistically significant for the validating couple conflict type score.
Holman and Jarvis’s results were similar, with participants who endorsed the validating type having the highest levels of martial satisfaction and stability. As in the present study, the researchers found that conflict-avoiding and volatile couples had less positive outcomes than validating couples, but were still more likely to have positive than negative outcomes and were more closely related on almost all measures to the validating couples than to the hostile couples.

Intriguingly, couples with older babies were more likely to have higher scores on the hostile couple conflict type scale, whereas couples with younger babies were more likely to have higher scores on the validating couple conflict type scale. Because this study was cross-sectional rather than longitudinal (and the sample was volunteer rather than randomly-selected), it cannot be determined whether couples may deteriorate toward an unregulated hostile couple conflict type during their first year after transitioning to parenthood or whether these variations simply reflect differences in the make-up of the sample. However, it may be that partners are more likely to take time to express and validate feelings and work toward conflict resolution when their babies are younger because their roles are not yet as firmly established and the new parents may rely more on each other for support. As babies grow older and become more demanding of attention (with increasing mobility, need to play, etc.), it may be harder for couples to take time to resolve conflicts. Additionally, if parents’ roles become more differentiated over their babies’ first year, they may have more difficulty understanding and validating each others’ perspectives. Such couples may become more vulnerable to slipping out of a regulated conflict style and into the unregulated hostile couple conflict style.
Couples’ average age was related to the couple conflict types as well, with older couples more likely to score highly on the hostile type scale and younger couples more likely to score highly on the validating scale. Since the transition to parenthood literature has not typically explored age as a factor, the discussion of its relevance here is largely provisional. As noted previously, younger couples may not yet have as strong of social support networks, necessitating partners’ greater reliance on each other; this situation may encourage more expression and understanding characteristic of the validating type. Older couples may have more established social connections, leading them to be less dependent on their spouses; this situation may make partners less cautious and more likely to be confrontational when dissatisfactions arise. It could also be the individuals who tended to approach conflicts with hostility were likely to have been involved in more unsuccessful romantic relationships before marrying and becoming first-time parents, making them older than individuals who tended to approach conflicts from a validating stance and who may have found partners more quickly.

What may be of most interest concerning the outcome of the canonical correlation analysis is the absence of the volatile and conflict-avoiding conflict types from the set of variables most strongly associated with the canonical variate. These two regulated couple conflict types were negatively associated with the explanatory set, as was the validating conflict type, but were not significant contributors to the correlation. Indeed, an examination of the Pearson correlation matrix demonstrates no significant positive or negative correlations between these two conflict types and any of the study’s variables (except correlations among the couple conflict types themselves). The results indicate the conflict-avoiding and volatile couple conflict types are not significantly associated with
negative outcomes, such as marital disaffection or role dissatisfaction. In contrast, many of the previously conducted studies of conflict during the transition to parenthood found conflict-avoidance to be deleterious (Crohan, 1996; Fox, 2001; Heinicke & Guthrie, 1996; Kluwer et al., 1997; Paley et al., 2005). However, Gottman (1994) noted the conflict-avoiding couple type may be better understood as conflict-minimizing; these couples’ approaches to conflict may be different from the type of avoidance assessed in previous research, which may be more similar to the destructive behavior Gottman called “stonewalling.” Conflict avoidance might also be more harmful to the relationships of the volatile and validating types. Also in the present study, the conflict-avoiding and volatile couple conflict type scores were not significantly associated with positive outcomes.

Other research has indicated conflict engagement (even seemingly negative engagement) is associated with more positive marital satisfaction than conflict avoidance (Heinicke & Guthrie, 1996; Paley et al., 2005). However, these studies primarily assessed conflict engagement patterns before the birth of the couples’ child; it may be volatile couples’ satisfaction decreases across the transition to parenthood as the demands of caring for the baby results in less time and energy for affection and successful repair attempts after conflicts.

Limitations of the Study

Issues involving the sample used for this study and the types of data collected contribute to inherent methodological limitations. Convenience sampling was used to invite couples to participate in this study, necessarily calling into question the representativeness of the sample and the generalizability of the results. However, given the resources of the researcher, random sampling of new parents was not possible. While official records have been kept private for some time, this information is now particularly
confidential with the passing of the Health Insurance Portability and Accountability Act (HIPAA) in 1996. Practitioners and professionals who would have complete lists of births and new parents are not able to release this information without consent from the individual parents. Therefore, direct access to this population was not possible, necessitating more indirect means of access. Although efforts were made to increase the diversity of the sample, this study’s sample (like those of most researching the transition to parenthood) was primarily White, affluent, and highly-educated. Stronger efforts are needed to recruit samples with more racial and socio-economic diversity. Researchers may benefit from working closely with community organizations and religious institutions serving minority populations, as well as organizations and health care groups serving less affluent new parents. Recruiting much of the sample through Internet bulletin-boards was likely to be at least partially responsible for this study’s sample being more affluent and highly educated compared to the general population.

Additionally, because the sample in this study only included married couples, the participants are not representative of the total population of new parents. As noted previously, nearly one third of infants born today have unmarried parents, with many of these parents living in a cohabitating relationship. For the purpose of this study, the sample was limited to married couples for several reasons. The Marital Disaffection Scale (MDS) used in this study has not been validated for use with unmarried couples. Also, married and unmarried couples most likely differ on a number of variables (including length of time in a relationship and processes involved in deciding to have a child). Therefore, this study was limited to married couples only. Because many new parents are in cohabitating relationships rather than marriages, future research would do
well to include cohabitating couples in their sample, noting similarities and differences between married and unmarried couples.

Unlike many studies of the transition to parenthood, the current investigation was cross-sectional in design rather than longitudinal. This limitation is reflective of the resources available for conducting this study. Rather than a detailed account of each couple’s transition to parenthood, this study provides “snapshots” of couples at different stages of the transition which may be compared to each other. Additionally, the data obtained in this study is correlational, limiting the ability to draw cause and effect conclusions from the data. Although interpretations of correlational data are made based on previous research, these analyses should be considered exploratory rather than definite. The self-report nature of the measures used in this study is another methodological limitation. The behaviors and experiences reported by the participants may or may not accurately reflect what occurs in their families. Although the instruments in this study were carefully chosen or designed to minimize effects of social desirability, it may have continued to influence participants’ responses.

The specific instruments used in this study generated limitations as well. Two of the four items on the violated expectations measure designed for this study were retrospective, asking participants to recall how they had expected (one month prior to the birth of their child) they and their partner would be sharing housework or parenting tasks. The retrospective nature of these questions suggests respondents’ recollections may not have been accurate. However, for the purpose of this study, how couples recalled their expectations may have been more important than what the expectations actually were at the time. A limitation of Cowan and Cowan’s (1978) “Who Does What?” questionnaire
became evident during data collection. Their questionnaire asks participants to rate partners’ contributions to the completion of various household and child-related tasks along a scale ranging from “she does it all” to “he does it all.” Unfortunately, there is no response choice provided for completion of the task by someone other than the mother or father. This resulted in inconsistent responses by parents whose children were in daycare, and by couples who did not complete some of the tasks listed in the survey items (e.g., yard work). For this study, the items most affected by these inconsistencies were removed from the analysis. Lastly, the couple conflict type scale developed by Holman and Jarvis (2003) presented three areas of concern. Each of the four couple conflict types was assessed only through a single item. Secondly, it is unknown how well couples’ self-ratings of their conflict type relate to their actual patterns of conflict behavior. Additionally, it is unknown if the couple conflict types that participants’ highly rated resemble their patterns of conflict behavior for all areas of disagreement, or if their patterns of conflict interaction may differ depending on the conflict topic.

Implications of the Findings

Implications for Future Research

The findings of the present investigation suggest several directions for future research. In particular, the results raise questions regarding marital disaffection and its relationship to both individual well-being and conflict among new parents, the construct of violated expectations (particularly for men), the importance of both partners’ and infants’ age, and how couple conflict type functions in the relationships of first-time parents.

While most transition to parenthood research has found associations between couples’ role arrangements and either marital satisfaction or individual well-being, both
outcomes have typically not been studied together. The present investigation found the marital relationship was more related to role arrangements than were the individual partners’ welfares. Future research should further explore the interplay between marital and individual welfare in an effort to provide a more complete explanation of the marital dissatisfaction and individual dysphoria (“baby blues”) common among new parents.

Previous research has also found a link between increased conflict across the transition to parenthood and marital dissatisfaction (Cowan et al., 1985). Marital processes present before the birth of the couple’s child were not assessed in the current study, and therefore conclusions cannot be drawn as to whether the couples in this sample experienced an increase in conflict when they became parents. However, for this sample, one predictor of their marital quality after the birth of their child was the extent to which they rated the hostile couple conflict type as characteristic of their conflict patterns. Future studies could explore whether all increases in conflict predict decreased marital satisfaction, or if this pattern only holds true for increases in negative (hostile) conflict.

More research on men’s violated expectations is clearly needed. Researchers are only beginning to study violated expectations among new fathers (e.g., Pancer & Pratt, 2000; Strazdins et al., 1997; Van Egeren, 2004). The current study’s variables explained relatively little of the variance in husbands’ violated expectations scores. Although the husbands’ mean violated expectations score indicated a somewhat greater magnitude of violated expectations than the wives’, their score was not associated with either household or child-related task differentiation. Men’s score on the volatile couple conflict type scale accounted for some of the variance in their violated expectations; additional research would be helpful in explaining this finding.
The correlational and cross-sectional nature of this study does not allow for definitive conclusions to be drawn from the association found between husbands’ violated expectations and their individual well-being. Longitudinal research could determine if men with higher levels of individual well-being prior to the birth of their child are more likely to be involved in child-related tasks than fathers with lower levels of individual well-being. An intervention study could also test whether increasing fathers’ involvement in child-related tasks would lead to higher levels of individual well-being compared to a control group.

Thus far, most investigations of violated expectations among couples transitioning to parenthood (including the present study) have asked partners to rate their expectations concerning which parent will complete more of the household or child-related tasks, or have asked participants to indicate the proportion of family work they expect contributed from their partners and themselves. Despite the tendency for couples to expect fairly egalitarian divisions of labor, violated expectations are common among new parents, with women contributing more than expected when compared to their male partners. One possible explanation for this outcome is that partners may underestimate the total amount of work required in caring for an infant; one study of parents’ complexity of thought about the impact of having a baby found significantly less complex thoughts and expectations among parents prior to the birth of their child compared to their complexity of thought after the child’s birth (Pancer & Pratt, 2000). Men’s overall amount of involvement may be similar to what both partners expected, while the total amount of work that is needed but was unexpected by both partners may fall disproportionately on women. Research differentiating between partners’ expectations for their overall amount
of contribution to family work and their expectations for the proportion of contribution to family work could be productive.

Further exploration of connections between marital processes and age (of both parents and infants) may also be helpful. This study found the couple’s average age predicted both marital disaffection and use of the hostile couple conflict type. Higher hostile couple conflict type scores were also predicted by higher infants’ age. Longitudinal research or a cross-sectional study with a randomly selected sample may help to determine if this finding was idiosyncratic to this particular sample or if couples’ conflicts become more hostile as they progress through their infants’ first year.

In their development of the couple conflict type scale, Holman and Jarvis (2003) called for future research comparing couples’ self-ratings with trained observers’ ratings of couples for Gottman’s conflict types. The results of the present investigation suggest this line of study would be useful, particularly for understanding couples who score highly on the volatile conflict type. In the present study, the volatile couple conflict type score was significantly and positively correlated with the hostile couple conflict type score. Holman and Jarvis noticed that volatile individuals were more like those they classified as hostile than were the conflict-avoiding or validating individuals. The finding in the current study may reflect this trend, or may indicate some of the volatile type couples were traveling on a path toward an unregulated hostile type of conflict. Alternatively, social desirability may have led some hostile type couples to rate themselves more highly on the volatile scale. Comparing self and observer ratings of couple conflict type would provide useful information, especially concerning further validation of the self-report measure.
Previous studies in the transition to parenthood literature have found negative associations between couples’ reliance on conflict-avoidance strategies and their marital satisfaction (e.g., Belsky & Kelly, 1994; Heinicke & Guthrie, 1996; Paley et al., 2005). However, high scores on the conflict-avoiding couple conflict type in the current investigation were not related positively or negatively to any of the study’s measures of satisfaction or well-being. One hypothesis put forth to explain these findings was that previous studies’ definition of avoidance in conflict may more closely approximate Gottman’s concept of stonewalling, whereas the conflict-avoiding type scale in the present study may be more an indication of conflict-minimizing rather than complete avoidance. Crohan’s (1996) research acknowledged distinctions in constructive and destructive avoidance. Future research should continue in this direction; of particular interest would be how conflict-avoidance (or minimizing) strategies differentially impact Gottman’s three regulated couple conflict types.

The concept of “match” may be another important area for future investigations of the couple conflict types among new parents. As noted previously, this investigation only examined discrepancies in partners’ perceptions of how frequently their conflicts resembled each of the four couple conflict types. Examining discrepancies in partners’ preferences for the couple’s typical approach to conflict may be more useful. Another productive line of research could investigate the importance of match between couple’s typical approach to conflict (their couple conflict type) and the approach they use in a specific conflict or the approach they use for a particular conflict domain. For example, it would be useful to examine whether volatile couples are more dissatisfied if they avoid disagreements over their division of labor rather than engaging in conflict.
The current study was an exploratory investigation of how Gottman’s couple conflict types might present in couples who recently transitioned to parenthood. More in-depth research of the couple conflict types among new parents seems warranted. Holman and Jarvis (2003) suggested exploring within-type differences in addition to across-type differences. They provided the example of comparing volatile couples with high marital satisfaction to volatile couples with low marital satisfaction. Because task differentiation and role dissatisfaction in the present investigation were not significantly associated with volatile or conflict-avoiding couple types, it may also be helpful to compare high task differentiation and role dissatisfaction couples with low task differentiation and role dissatisfaction couples within these regulated couple conflict types. This line of inquiry may illuminate processes contributing to more or less role differentiation and satisfaction, which may prove universal or idiosyncratic across the couple conflict types. Although quantitative research can provide clues as to these strengths and weaknesses among new parents’ couple conflict types, qualitative inquiry may be particularly adept at providing a richer representation of the conflict types.

Implications for Theory

The study’s findings provide further validation for the three theoretical frameworks which guided this study, as well as some contradictions. The theoretical foundations also enable a more complex understanding of the research findings. The family life cycle perspective comprised the study’s first framework. Parke noted the family life cycle represents “multiple developmental trajectories” with each family member’s individual development intersecting and overlapping with other member’s individual development and the developmental stage of the family as a whole (1988 as quoted in Cowan, 1991, p. 7). In the present study, how the couples experienced their babies’ first year (constituting
their first year in a new family life cycle stage) was related to their individual development, namely the age of the parents. This relationship was evident for marital processes (i.e., reliance on a hostile conflict type) and marital outcomes (i.e., disaffection). Another assertion of the family life cycle perspective is that relationships change as they progress through the life cycle or life cycle stage. Although future research is needed to clarify this finding, couples’ were more likely toward the end of their babies’ first year to agree the hostile conflict type represented the couples’ typical approach to conflict than they were at the beginning of the year. This result suggests the couples’ relationships may be more vulnerable to negative conflict as they progress through this stage in the family life cycle.

An interactionist view of gender was a second framework informing the study. This perspective is particularly salient when considering the findings related to couples’ role dissatisfaction and task differentiation. Fox (2001) suggested motherhood could be viewed as a particularly strong form of “doing gender.” Her research and others (e.g., Walzer, 1996, 1998) found that indeed, mothers were doing a disproportionate amount of caring for their child when compared to fathers’ contributions, and this role arrangement was intertwined with couples’ definitions of their parental roles. The current study also found child-related task differentiation to be relatively high among new parents, suggesting these couples are simply “doing parenthood” as they are “doing gender.” However, high task differentiation of child-related tasks was also associated with couples’ higher role dissatisfaction. This result illustrates the concept of struggle and negotiation in defining gender and gender-appropriate roles. As West and Zimmerman contended, the process of doing gender leads to an appearance of gender differences
being natural and inherent. This study’s findings demonstrate that mothers’ primary responsibility for child care does not *feel* natural and inherent to couples, as evidenced by the couples’ reported higher role dissatisfaction the more their parenting roles diverged along this gender line.

Another assertion of the interactionist view of gender is that gender roles are negotiated within relationships. The present study’s findings fit with this contention as a significant difference was found between couples’ style of negotiation (the couple conflict types) and the amount of task differentiation concerning child care present in their relationship. Only the validating couple conflict type score was significantly associated with lower levels of task differentiation regarding child-related tasks. The other three couple conflict type scores (volatile, conflict-avoiding, and hostile) were not significantly related, positively or negatively, to task differentiation. This finding implies how conflicts are negotiated may be an important factor in how couples’ arrange their parenting roles.

Gottman’s typology of marital conflict provided a final theoretical perspective guiding the present study. Much of the study’s findings are in line with Gottman’s theory and research, while some of the results are contradictory. Like Holman and Jarvis’s (2003) study, this investigation further validates Gottman’s (1994) conceptualization of four distinct couple conflict types. As with their research and Gottman’s own, this study found the hostile couple conflict type score to be correlated with negative outcomes (e.g., higher role dissatisfaction and marital disaffection, and lower individual well-being) while these negative outcomes were not significantly associated with any of the three regulated couple conflict types. However, the results of this study, like Holman and
Jarvis’s, contradict Gottman’s (1999) assertion that the three regulated types are equally constructive in marriage. The validating couple conflict type was the only type significantly related to positive outcomes such as lower levels of role dissatisfaction and marital disaffection in the correlation matrix; it was also associated with these variables and individual well-being in the canonical correlation. The stepwise regression analyses identified the volatile couple conflict type as a significant predictor of more violated expectations for husbands (in the direction of the wives’ doing more than expected) but lower marital disaffection, though it was not significantly associated with these variables in the correlation matrix.

These findings contradict Gottman’s hypothesis that validating couples might be particularly vulnerable during the transition to parenthood, perhaps growing more distant. Since the study was not longitudinal, it cannot be determined how the transition impacted validating couples, or whether they experienced declines in satisfaction compared to their previous functioning. The only finding suggesting a change in their functioning was the canonical correlation’s result indicating couples with younger babies had higher scores on the validating conflict type scale than couples with older babies. The lack of significant associations between the study’s couple-level variables and the volatile and conflict-avoiding type scores suggests these two regulated types, while functional, may not be as highly functional as the validating type. It may also indicate that volatile and conflict-avoiding types may be more negatively impacted by the transition to parenthood, perhaps having more difficulty maintaining the 5-to-1 positive-to-negative interaction ratio Gottman describes as critical.
Gottman also suggested his typology of marital conflict may intersect with Fitzpatrick’s (1988) typology of gender traditionalism in couples. The results of the present study contradict his hypotheses regarding this intersection. He noted validating couples might be analogous to one of Fitzpatrick’s couple types defined by gender role traditionalism; however, the present study found the validating couple conflict type score was the only type significantly associated with less child-related task differentiation, indicating more shared parental roles. Gottman asserted the volatile couple type might correspond to one of Fitzpatrick’s couple types defined by androgynous roles; volatile couple conflict type scores in the current investigation, however, were not significantly associated, positively or negatively, with task differentiation of either household or child-related tasks.

Implications for Practice

Cowan and Cowan (1995; 2000) noted that many couples transitioning to parenthood appear to be “low risk.” Certainly, the majority of couples participating in this study would not seem particularly at risk of experiencing difficulties across the transition to parenthood; the couples were all married and most were affluent and well-educated. Yet a wide range of adjustment was evident in these marriages, and particular processes were found to be associated with how satisfied or dissatisfied couples were with their marriage and their family roles. Interestingly, seemingly protective factors (such as age, income level, and number of years married) were either not significantly associated with the study’s primary variables, were minimally related, or predicted more negative adjustment. Demographics which seemingly should have differentiated between high risk and low risk couples failed to do so. Noting longitudinal studies have indicated somewhere between one-third and one-half of first-time parents experience significant
difficulties, Cowan and Cowan (1995) argued the need for “interventions to ease the transition to parenthood” for this seemingly low risk population and have called for prevention programs to be provided systematically to new parents. In this section, the present study’s findings and implications for providing counseling to couples transitioning to parenthood are discussed, along with implications for prevention programs intended for groups of new parents.

Like others before it (e.g., Cowan & Cowan, 2000; Feldman, 2000; Gottman, 1994; Ruble et al., 1988), this study reiterated the importance of fathers’ involvement in the practical and emotional care of their children. Fathers who did not contribute as much to housework and childcare as they had expected they would had lower levels of individual well-being. Fathers’ level of involvement also seemed to affect wives, for whom more child-related task differentiation predicted violated expectations. Couples who reported more task differentiation of child care reported higher levels of disaffection in their marriages and role dissatisfaction. These results reinforce Shapiro and Gottman’s (2005) contention that “it should be an important objective of any transition to parenthood intervention to keep fathers involved with their babies” (p. 4). Interventions have succeeded in helping couples to increase their marital and role satisfaction, but often without resulting in significant changes in fathers’ involvement with housework and child care (e.g., Cowan & Cowan, 2000; Hawkins et al., 1994) As some of the research has indicated the quality of the marital relationship may predict fathers’ level of participation, therapists and family educators may need to work on improving marital satisfaction to encourage fathers to be more involved. However, as Hawkins and his colleagues (1994) argued, professionals need to guard against increasing satisfaction while undercutting
women’s “efforts to obtain greater equity in the allocation of domestic labor by lowering their expectations of what they can realistically hope for, or by helping men feel better about their involvement in daily family work with only small changes in behavior relative to what their wives need” (p. 219). Couples’ task differentiation or sharing should be assessed in therapy and prevention programs both before treatment and as an outcome measure at its end.

Couples’ level of role dissatisfaction was identified in this study as the most significant predictor of their level of marital disaffection. Thus, satisfaction with the division of labor seems to be an important marital issue. This finding suggests therapists should address the division of labor when counseling new parents for any marital issue, and couples’ role arrangements should be discussed in prevention programs. While couples’ actual role arrangement (their level of task differentiation) was an important predictor of relational outcomes in the study, satisfaction with their roles was found to be more strongly related to couples’ level of marital disaffection and also wives’ level of violated expectations. Helping couples to form role arrangements they find satisfying may be more important than encouraging less task differentiation across-the-board for all couples. Therefore, therapists and family educators could assess whether or not gender role traditionalism or non-traditionalism is important to the couple. However, it may be best to err on the side of promoting less task differentiation and more task sharing (especially concerning child care); “traditional” couples who decide against a more egalitarian division of labor may easily fall into their preferred gender-differentiated roles, but non-traditional couples may need more help to increase their task sharing since the general pull of the transition seems to be toward greater role differentiation.
The study’s findings concerning violated expectations, like much of the research before it (Hackel & Ruble, 1992; Ruble et al., 1988; Van Egeren, 2004), imply that expectations need to be addressed when counseling couples transitioning to parenthood and when conducting prevention programs. In the current study, couples’ levels of violated expectations were the second most significant predictor of their role dissatisfaction. This finding suggests the importance of helping partners to share their expectations, form mutual expectations, and then put these into practice. Practitioners can help couples think more complexly about the amount of work involved in caring for an infant. They can also help couples assess how well they are meeting their expectations, and with the partners strategize different ways couples can divide family work that would help them come closer to meeting their expectations. Therapists and family life educators could also help couples distinguish between their preferences for the division of labor and their expectations. This study found that role dissatisfaction predicted wives’ level of violated expectations. This suggests that wives with less violated expectations were more satisfied with their roles. However, since this measure was retrospective, it is also possible that wives who were more satisfied with their roles recalled expectations more in line with their current arrangements. Other studies have also found women’s satisfaction with their division of labor to be more important than their actual role arrangements (Goldberg & Perry-Jenkins, 2004; Hackel & Ruble, 1992). For “traditional” women, expectations for a more shared division of labor may be less important than their preferences for more traditional roles. Yet nontraditional women who expect high involvement from their partners may be more dissatisfied than those who would simply prefer men’s involvement.
Increasingly, professionals are recognizing the need to help couples who are transitioning to parenthood establish more constructive approaches to regulating and resolving conflict (e.g., Glade, Bean, & Vira, 2005; Shapiro & Gottman, 2005). While earlier studies tended to define constructive conflict narrowly (Crohan, 1996; Kluwer et al., 1997), more recent research is broadening the definition (Heinicke & Guthrie, 1996; Paley et al., 2005). The results of the present study add to this emerging principle. Examining Gottman’s couple conflict types as they presented in first-time parents resulted in findings suggesting there are appreciably different ways couples can constructively approach conflict. As noted previously, the hostile couple conflict type score was repeatedly associated with negative outcomes (including higher marital disaffection and role dissatisfaction). However none of Gottman’s three regulated types was found to be a significant predictor of role dissatisfaction. Higher volatile couple conflict type scores explained some of the variance in husbands’ violated expectations, but was also found to be a significant predictor of less marital disaffection. The validating couple conflict type score was not a significant predictor in any of the stepwise regression analyses, but was associated with less marital disaffection and role dissatisfaction, and more individual well-being in the canonical correlation procedure. It was also related to less child-related task differentiation in the Pearson correlational matrix. The conflict-avoiding type score was not significantly related, positively or negatively, to any of the study’s variables except the other couple conflict types. This overall lack of predictive quality compared to the hostile type score suggests the three regulated couple conflict types are more like each other than they are like the hostile couple conflict type which was associated with negative outcomes.
These findings have several implications for therapists and family educators seeking to aid couples in developing more constructive approaches to conflict. Gottman (1999) noted that practitioners often encourage couples to adopt an “active-listening model” in approaching conflict, which is similar to how validating couples engage in conflict, listening to partners’ complaints and validating feelings. However, his research found two other approaches to conflict, the volatile and conflict-avoiding couple conflict types, were also constructive. The results from the present study are in line with Gottman’s findings. The three regulated couple conflict types seem to be relatively similar in their abilities to negotiate satisfying roles, have satisfying marriages, and an adequate sense of individual well-being. Couples who indicated their conflicts frequently resemble those of the hostile couple conflict type seem to be particularly at risk of difficulties and may represent new parents most in need of intervention.

However, as discussed previously, validating couples may have an advantage over the other two regulated couple conflict types. Volatile and conflict-avoiding partners may represent the seemingly “low risk” couples Cowan and Cowan (1995; 2000) argued may actually need more help during the transition to parenthood, but who often are not sufficiently distressed to present for therapy. Scores for these two couple conflict types were associated with higher role dissatisfaction and child-related task differentiation than was the validating couple conflict type score, indicating volatile and conflict-avoiding couples may need more assistance in negotiating satisfying roles and perhaps increasing fathers’ involvement. As discussed earlier, Gottman contended each of the three regulated types is associated with strengths and weaknesses. Since none of the three regulated types were significantly associated with negative outcomes in the present study,
it appears a helpful approach of counseling and prevention programs for new parents would be to capitalize on the strengths of the couples’ preferred approach to conflict while minimizing its weaknesses. Although couples may benefit from “borrowing” strategies from other conflict types, the approach suggested here, based on Gottman’s theory and research along with this study’s findings, would be in contrast to advocating similar approaches to conflict for all couples.

The validating couple conflict type score in the present investigation was associated with lower levels of task differentiation, as well as lower role dissatisfaction and marital disaffection, and higher levels of individual well-being. These findings suggest prevention programs should simply help validating couples stay on track, continuing to do what is benefiting their marriages. Validating couples’ strong marital friendship may be particularly associated with their adjustment, and its nurturing should be promoted.

Although the volatile couple conflict type was not significantly correlated with the marital disaffection variable, it was a significant predictor of lower marital disaffection, providing a unique contribution to explaining the variance in this factor. Gottman noted the success of the three regulated types depended on their maintenance of a 5-to-1 ratio of positive-to-negative interactions. It is possible the challenges of the transition to parenthood and the demands of caring for a new baby may disrupt the balance in volatile couples’ interactions; conflicts may increase while less time and energy may be available for couples to incorporate successful repair attempts. Therapists and family educators may be of most help by reminding volatile couples of the importance of their positive interactions and repair attempts, and assisting them in integrating these into their changing family circumstances.
Gottman noted couples from each of the three regulated types may need to borrow strategies from the other types at times to effectively resolve conflict; he also suggested conflict-avoiding couples may have difficulties when conflicts arise which cannot be minimized. Practitioners may be supportive of conflict-avoiding couples by helping them to recognize conflicts that cannot be minimized, and by coaching them to develop more direct approaches to resolving conflicts when the situation warrants. Belsky and Kelly (1994) suggested conflict-avoiding couples are at risk of decreased intimacy across the transition to parenthood since they tend to maintain intimacy through sharing activities rather than feelings, and the transition is often associated with diverging roles. Therefore it may be especially important for professionals to encourage less task differentiation and more task sharing among conflict-avoiding couples as this could help them maintain their connection. Conflict-avoiding couples could also be encouraged to discuss their marital strengths and shared philosophies, as these represent points of connection as well (Gottman, 1999).

The study’s findings also have implications for addressing hostile type approaches to conflict. Older parents may need more help from prevention programs and counseling to help prevent or reduce hostile approaches to conflict and also marital disaffection. As noted previously, the cross-sectional nature of the present study prevents knowing with certainty whether the association between couples’ rating of the hostile couple conflict type and their infants’ age actually represented a propensity for deterioration toward more hostile approaches to conflict over time. However, these findings suggest prevention efforts focusing on developing or maintaining constructive approaches to conflict may be more effective earlier in the transition to parenthood rather than later.
Glade, Bean, and Vira (2005) provided a comprehensive review of interventions targeting the transition to parenthood and a list of treatment recommendations which would be valuable to therapists and family educators. Their review is particularly helpful in guiding professionals’ decisions concerning treatment modalities and reaching the population of couples transitioning to parenthood who could benefit from services.

**Implications for Policy**

The results of the current investigation have implications for public policy as well. Primarily, these relate to work-family policies and policies concerning prevention programs. In this study, couples’ role arrangements and their satisfaction with their roles were related to the quality of the couples’ marriage. Specifically, lower child-related task differentiation predicted lower role dissatisfaction and marital disaffection; higher child-related task differentiation predicted higher role dissatisfaction and marital disaffection. These findings, along with results from much previous research (e.g., Cowan & Cowan, 2000; Feldman, 2000; Gottman, 1994; Ruble et al., 1988) imply a need for policies encouraging greater father involvement in caring for their children, by removing institutional-level barriers to their participation and by promoting relational processes associated with their higher involvement. Difficulties associated with the transition to parenthood, including more gender-differentiated roles, have been linked to negative outcomes for men, women, and children, including the couples’ decreased marital satisfaction and individual well-being (Cowan & Cowan, 2000; Gottman, 1994; Hackel & Ruble, 1992; Ruble et al., 1988; Strazdins et al., 1997) and poorer adaptation among children (Cowan & Cowan, 2000; Gottman, 1999; Shapiro, 2005). These effects have serious implications for a society dependent on its foundation of well-functioning families. As Cowan and Cowan asserted, “In our view, a serious concern about the
preservation of strong family relationships argues for the allocation of increased resources for programs to strengthen families all along the risk continuum. Programs to ease the transition to parenthood seem an obvious place to begin” (p. 422).

One way programs can ease the transition to parenthood is by removing institutional barriers which make the transition unduly difficult for families. The Family and Medical Leave Act (FMLA) was designed with such a purpose, but may be relatively ineffective or may actually increase other kinds of strain for new parents (Singley & Hynes, 2005). Because the leave of absence it secures is unpaid, couples often cannot afford to take advantage of this opportunity. Women tend to take maternity leave to recover from childbirth, but then take on a disproportionate amount of child care compared to their partners as their lesser earning potential makes them the logical candidate for a more extended leave, part-time work, or complete withdrawal from the workforce. Men’s higher earning potential tends to restrict fathers to primarily providing for their families financially, while their practical and emotional contributions to family work are significantly less than their partners’. However, opportunities exist for work-family policies which promote better functioning in the families of new parents.

Because fathers are unlikely to take unpaid leave, paid leave may be necessary to increase fathers’ participation in caring for their infants. Given the relative infrequency with which a couple adds a baby to their family, the costs of providing short-term paid leave may be fairly easily off-set by the rewards of higher employee retention and productivity. However, even a brief leave of absence may encourage a higher level of fathers’ participation in caring for their children. Researchers have found that mothers continue to provide most of the care for their children, even after returning to full-time
employment. A similar principle may apply for fathers. If men are given the opportunity and encouragement to participate in child care through a short-term paid leave of absence, might their participation be higher than fathers who are not given this opportunity, even after they return to work? Government could help encourage stronger family adaptation to the transition to parenthood by providing incentives for employers’ who offer paid leave and other family friendly policies for new parents, such as giving tax breaks to these employers. Government could also “pay for performance,” providing subsidies to companies based on their employees’ actual use of short-term paid leave so that employers would have reason to encourage taking the leave rather than informally discouraging it.

The findings of the present study also suggest the importance of preventative programs targeting couples’ relational adjustment to the transition to parenthood. Just as routine medical care is imperative to the health of the mother and baby during pregnancy, addressing relational issues is imperative to the health of the new family and its ability to care for its children. As Cowan and Cowan (1995) argued:

If a life transition experienced by approximately 90% of contemporary married couples can be expected to be accompanied by stress and distress for many parents, it is likely that this strain will permeate some or all of the relationships in the family, which, in turn, can be expected to compromise children’s optimal development. In that case, it would seem reasonable to create targeted or even universal preventative intervention programs designed to enhance parents’ coping skills and reduce their stress or to provide remedial help for couples already in difficulty when the transition begins. (p. 412)

Because society depends on well-functioning families to produce well-functioning citizens, a transition which threatens dissolution or maladjustment of families should be of particular concern.
The results of the current study indicate areas of concern (such as task differentiation) which would be valuable to address through preventative efforts. The findings also suggest prevention programs could play a role in improving relational processes such as approaches to conflict. In this study, one couple conflict type score (hostile) was consistently related to negative adjustment. Two couple conflict type scores (volatile and conflict-avoiding) were essentially unrelated to either positive or negative outcomes, suggesting couples approaching conflict from these types may have the potential to improve, deteriorate, or maintain a mid-level of adjustment. With only one couple conflict type score (validating) consistently associated with positive adjustment, a place for prevention efforts is evident.

**Conclusion**

The findings of this study emphasize the importance of strong partnerships among couples transitioning to parenthood. Like other research before it, the present investigation found the more differentiated partners’ contributions in their new roles as parents were, the less intimacy and affection were present in the marriage. How satisfied couples were with their family roles also comprised the strongest predictor of their marital happiness. Task differentiation was the most significant predictor of role dissatisfaction. This study’s findings also call for a broadened definition of constructive conflict among new parents. The differences and similarities apparent among the couple conflict types investigated suggest the potential for couples to negotiate more equitable and satisfying roles.

The 132 couples who participated in this study comprise a small portion of the millions of couples who make the transition from partners to parents. Yet the information they provided to the study bespeaks some universal truths about this important transition.
Although new parents face many life changes, from alterations in their daily routines and work to transformations of their relationships and sense of self, couples can show remarkable resiliency in adapting to these challenges. We have much to learn from both the proficiency and imperfection evident in the solutions couples reach as they transition to parenthood.
APPENDIX A
INFORMED CONSENT LETTER

Informed Consent Letter – Internet-Based Survey

Thank you for your help in this study of couples who have recently become parents. This study is part of my dissertation research project I am completing as a doctoral candidate in the Department of Counselor Education at the University of Florida. As a parent of a toddler, I certainly remember how valuable your time is to you during that first year after your baby’s arrival. Therefore I greatly appreciate your taking the time to help with my research.

I am contacting couples to ask them about how they are adjusting to parenthood, how they complete various tasks related to caring for their baby and their household, and how they handle conflicts. Participation in the study involves completing the survey that begins after clicking the “I agree to participate” button on this screen, and takes about 15 to 20 minutes.

Caring for a baby is often both fulfilling and stressful for new parents, and many family professionals and specialists have been working to help ease the transition to parenthood. Unfortunately, we still have little information about how couples (both mothers and fathers) cope with the changes that come along with becoming a parent. Results from this survey will show us more about what helps couples with these changes, so we can find ways for this transition to be less stressful for couples.

If you agree to participate, your answers will be kept confidential to the extent provided by law and will be released only as summaries in which no individual’s answers can be identified. This survey is voluntary, and you may withdraw at any time. However, you can help me very much by taking a few minutes to share your experiences and opinions about your relationship and new parenthood. I will be able to use your responses to the survey only if your spouse completes the survey as well. Couples’ surveys will be matched based on their wedding date and their child’s birth date. If you take part in this study, please do not discuss your responses with your spouse until both surveys have been submitted.

Before completing the survey, please make sure you are eligible to participate by checking the boxes next to the following questions if the answer is “yes”:

- Are you married and sharing a household with your spouse?
- Do you and your spouse have one child between the ages of 2 months and 13 months?
- Is this your first and only child? (i.e., neither you nor your partner has any other children?)
There are no anticipated risks, and no direct benefits for participating in this study. However, participating in the study may help you to better understand how you and your partner are adjusting to parenthood. All participants will also have the option to receive written information about how couples strengthen their marriages across the transition to parenthood. Lastly, I am providing a link to various Internet resources for new parents: Parent Resources.

If you have any questions or comments about this study, I would be happy to talk with you. You can call me at (352) 316-1692, or can e-mail me at Lmccarth@ufl.edu. If you would prefer to complete a paper-version of this survey, please contact me so that I may mail you a copy of the survey. You can also direct any questions or comments to my advisor, Dr. Ellen Amatea at (352) 392-0731, extension 232 or by e-mail at eamatea@coe.ufl.edu. If you have any questions or concerns about the rights of research participants, you may call the University of Florida Institutional Review Board at (352) 392-0433 or write to UFIRB Office, Box 112250, University of Florida, Gainesville, FL 32611-2250.

Thank you very much for helping with this important study.

Sincerely,

Laura McCarthy, M.Ed., Ed.S.
Doctoral Candidate
Principal Investigator

To state that you have read and understand the procedure described above and voluntarily agree to participate in this survey, click on the “I agree to participate” button below. Once you click on the button, you will be taken to the beginning of the survey.

The following items will be used to match your survey with your spouse’s so your responses can be analyzed together.

Wedding Date: mm/dd/yyyy
First Child's Birthdate: mm/dd/yyyy
First child is a boy ☐ girl ☐
I am the: [Click here to select] ☐
Last 4 digits of your home telephone number

I agree to participate
Dear _____________________________,

I would like to ask for your help in a study of couples who have recently become parents. This study is part of my dissertation research project I am completing as a doctoral candidate in the Department of Counselor Education at the University of Florida. As a parent of a toddler, I certainly remember how valuable your time is to you during that first year after your baby’s arrival. Therefore I greatly appreciate your taking the time to help with my research.

It is my understanding you had your first baby sometime in the last year. I am contacting couples to ask them about how they are adjusting to parenthood, how they complete various tasks related to caring for their baby and their household, and how they handle conflicts. Participation in the study involves completing the enclosed survey booklet, and takes about 15 to 20 minutes. You may instead complete an Internet version of the survey if you would prefer: You can access the survey at http://plaza.ufl.edu/lmccarth/survey.htm.

Caring for a baby is often both fulfilling and stressful for new parents, and many family professionals and specialists have been working to help ease the transition to parenthood. Unfortunately, we still have little information about how couples (both mothers and fathers) cope with the changes that come along with becoming a parent. Results from this survey will show us more about what helps couples with these changes, so we can find ways for this transition to be less stressful for couples.

If you agree to participate, your answers will be kept confidential to the extent provided by law and will be released only as summaries in which no individual’s answers can be identified. When you return your completed questionnaires, your names will be deleted from the mailing list and never connected to your answers in any way. This survey is voluntary, and you may withdraw at any time. However, you can help me very much by taking a few minutes to share your experiences and opinions about your relationship and new parenthood. If for some reason you prefer not to respond, please let me know by returning the blank questionnaire in the enclosed stamped envelope. I will be able to use your responses to the survey only if your spouse completes the survey as well. If you take part in this study, please do not discuss your responses with your spouse until both surveys have been sealed in the enclosed envelope.

For the purpose of this study, only married couples who are sharing a household are eligible to participate. Couples must have one child between the ages of 2 months and 13 months. Unfortunately, if either partner has another child, you will not be able to participate in the study.

There are no anticipated risks, and no direct benefits for participating in this study. However, participating in the study may help you to better understand how you and your partner are adjusting to parenthood. All participants will also have the option to attend a presentation or receive written information about how couples strengthen their marriages across the transition to parenthood. Lastly, I have enclosed a small token of appreciation as a way of saying thanks for your help.
If you have any questions or comments about this study, I would be happy to talk with you. You can call me at (352) 316-1692, or you can write to me at the address that is on this letterhead or on the enclosed envelope. You can also contact my advisor, Dr. Ellen Amatea at (352) 392-0731, extension 232. If you have any questions or concerns about the rights of research participants, you may call the University of Florida Institutional Review Board at (352) 392-0433 or write to UFIRB Office, Box 112250, University of Florida, Gainesville, FL 32611-2250.

Thank you very much for helping with this important study.

Sincerely,

Laura McCarthy, M.Ed., Ed.S.
Doctoral Candidate
Principal Investigator

I have read the procedure described above. I voluntarily agree to participate in the procedure, and I have received a copy of this description.

________________________________________  ____________________________
Husband’s signature     Wife’s signature

_____________________  ______________________
Date       Date

Would you like to attend a workshop presentation about how couples strengthen their marriages across the transition to parenthood?

_____ Yes. Please contact us at ______________________ (phone number or e-mail address) with information about the presentation.

_____ No.

Would you like to receive written information about how couples strengthen their marriages across the transition to parenthood?

_____ Yes. Please mail this information to ______________________ (street address) ______________________ (city, state, zip)

_____ Yes. Please e-mail this information to __________________________

_____ No.
APPENDIX B
DEMOGRAPHIC QUESTIONNAIRE

What is your gender?
☐ Male
☐ Female

What is your age? ______

What is your baby’s date of birth?___________________

What is your race/ethnicity? (Check all that apply)
☐ Caucasian/White
☐ African-American/Black
☐ Asian or Pacific Islander
☐ Native-American
☐ Hispanic/Latino/Latina

What is the highest level of education you have completed?
☐ Less than high school
☐ High school
☐ Associate/Junior College
☐ Bachelor’s
☐ Graduate

Are you currently a student?
☐ Yes, full time
☐ Yes, part time
☐ No

What is your employment status?
☐ Employed full-time
☐ Employed part-time
☐ Work in home-based business IF YES, How many hours per week? ___
☐ Not employed outside the home
What was your approximate household income last year?

- Under $10,000
- $10,000-$14,999
- $15,000-$19,999
- $20,000-$29,999
- $30,000-$39,999
- $40,000-$49,999
- $50,000-$59,999
- $60,000-$69,999
- $70,000-$79,999
- $80,000-$89,999
- $90,000-$99,999
- Over $100,000

What is your religious preference? *(List denomination if applicable)*

What is your wedding date?  ____/_____/______  *(month / day / year)*
APPENDIX C
VIOLATED EXPECTATIONS MEASURE

In general, how equally or unequally do you currently share parenting tasks?
☐ I do much more than my partner
☐ I do somewhat more than my partner
☐ We share things equally
☐ My partner does somewhat more than me
☐ My partner does much more than me

Approximately a month before your baby’s birth, how did you expect you would be sharing parenting tasks?
☐ I expected to do much more than my partner
☐ I expected to do somewhat more than my partner
☐ I expected we would share things equally
☐ I expected my partner to do somewhat more than me
☐ I expected my partner to do much more than me

In general, how equally or unequally do you currently share housework?
☐ I do much more than my partner
☐ I do somewhat more than my partner
☐ We share things equally
☐ My partner does somewhat more than me
☐ My partner does much more than me

Approximately a month before your baby’s birth, how did you expect you would be sharing housework?
☐ I expected to do much more than my partner
☐ I expected to do somewhat more than my partner
☐ I expected we would share things equally
☐ I expected my partner to do somewhat more than me
☐ I expected my partner to do much more than me
LIST OF REFERENCES


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Laura Anne McCarthy was born and raised in Denver, Colorado. The daughter of Paul Brekus and Catherine Hicks, she has a younger sister Andrea Brekus. Laura attended Denver public schools, and graduated from Denver North High School in 1997.

Laura graduated with honors from the University of Colorado at Denver in 2000, with a Bachelor of Arts in psychology. With the assistance of the Albert A. Murphree Presidential Fellowship, she began her graduate studies in the Department of Counselor Education at the University of Florida. Her major emphasis was in marriage and family counseling. She received Master of Education and Specialist in Education degrees in 2002. During her master’s-level and doctoral-level studies, Laura had the opportunity to work with children, couples, and families through her internships at the Child Advocacy Center in Gainesville and the Gainesville Family Institute. As a doctoral student, Laura supervised master’s-level counselors-in-training in the department’s Advanced Family Therapy Clinic for two semesters as they provided couples and family therapy to families in need in the community. Laura also taught two undergraduate courses, Interpersonal Communication for three semesters and Stress and Anxiety Management for one semester.

In 2003, Laura’s daughter Rachel was born. Her son Zachary was born in 2005. Laura now lives in Conifer, Colorado, with her husband Kevin McCarthy and their two children.