Fact Sheet

Healthy Dating Leads to Healthy Marriage

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The foundation of healthy marriages is largely shaped by choices and experiences in adolescence and early adulthood. Because a majority of Americans will marry at least once during their lifetimes, it is logical to promote healthy dating and marriage preparation so that couples can maximize the benefits of marriage and minimize the costs of divorce.[1,2,3]
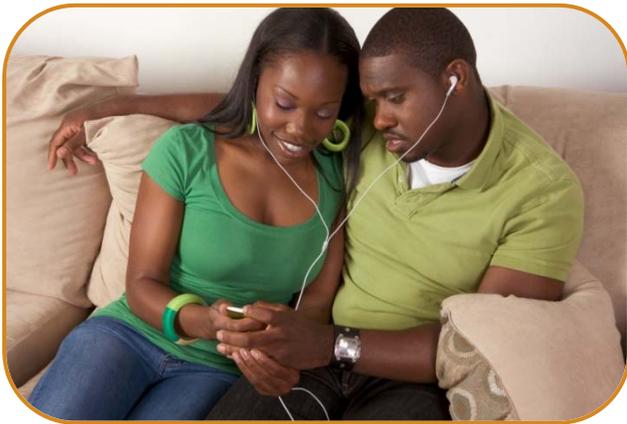
Trends in National and Statewide Studies on Divorce and Healthy Marriages

Age at first marriage has steadily increased during the past several decades with current estimates for men and women who marry for the first time at approximately 28 for men and 26 for women.[11] Rates of marital disruption remain relatively stable at about 50%, if both separations that do not dissolve a marriage and divorces are included.[12,13,14] Research has shown that interracial marriages have higher rates of divorce, with black, white, Hispanic, and Asian marriages following respectively. First marriages and remarriages (i.e., after a

*These definitions are introduced here as a result of adaptations of trusted state and national studies.

first marriage) terminating in divorce average about an eight-year duration, suggesting that the premarital and early years of marriage are critical contexts for the creation and maintenance of marital quality, stability, and satisfaction.[15] Low-resource couples are particularly prone to divorce, due to the additional strains and stressors they experience that make them vulnerable to family issues such as inadequate access to economic, education, employment, and healthcare opportunities and the consequences associated with domestic and community violence.[16]

Selected national and statewide studies point to the following as major reasons for getting a divorce:

- getting married too young;

- lack of commitment;

- too much conflict and arguing;

- infidelity and extramarital affairs;

- unrealistic expectations in marriage;

- lack of relationship equality, little or no helpful premarital preparation;

- domestic violence;

- financial problems; and

- conflicts about the division of labor (e.g., paid work, housework).

Conversely, these same studies show that couples who report being in a healthy marriage report high levels of commitment to their spouses, strong friendships, consistent nurturing of their marriage relationships, and a positive system for communicating and resolving conflicts.[17-20]

While it may appear that today's youth espouse something other than marriage, the reality is that their general attitudes and beliefs across race, ethnicity, and gender support the goals associated with healthy adult marital relationships. In fact, most plan on getting married at some point.[21] However, this plan for

marriage can look very different for low-resource individuals when compared to high-resource individuals. Low-resource individuals tend to view marriage as a type of "finish line" that is attainable when resources such as good employment and a living wage are in place. Relatively few low-resource couples reach this finish line, which may help to explain why they tend to experience higher cohabitation and unwed birth rates than do high-resource individuals. Because high-resource individuals have increased access to economic, educational, employment, healthcare, community, and political support from family and other entities, they tend to experience more freedom and flexibility about when to get married, such as before good employment and a living wage are in place.[22]

Premarital Predictors of Healthy Marriage

Healthy dating that leads to healthy marriage is shaped by multiple predictors. At least five developmental factors influence individuals who are dating and their long-term relationship outcomes:

1) *timing and extent of involvement* (e.g., age, frequency, relationship duration);

2) *partner selection* (e.g., partner characteristics);

3) *content* (e.g., shared activities);

4) *quality* (e.g., degree of intimacy, affection, nurturance vs. irritation, antagonism, conflict, control and power issues); and

5) *cognitive and emotional processes* (e.g., emotional responses, perceptions, expectations, attributions).[23,24,25]

Each of these developmental factors can be subsumed into three general areas that have been found to predict marital quality, stability, and satisfaction:

been found to predict marital quality, stability, and satisfaction:

1) background and contextual factors,

2) individual traits and behaviors, and

3) couple interactional processes.[26,27,28]

Background and contextual factors

Background and contextual predictors such as cultural, religious, social, community, and societal norms are highly associated with the five developmental factors and their related relationship outcomes. The media, for example, exerts a major influence on each of the five developmental factors flooding national and international markets with messages about what "normal" relationships look like. These messages tend to be highly sexualized, promoting sex and sexuality as the foundation for healthy relationships rather than friendship.[29,30]

Personal preferences, choices, and experiences associated with the adoption or the rejection of these predictors help to explain specific individual variations with regard to what healthy or unhealthy dating looks like and how it is enacted. They also help to explain consequential implications for future marital quality, stability, and satisfaction. Early age at marriage, for example, is consistently associated with marital instability and poverty, especially for women. Higher levels of education, income, and employment are generally more predictive of higher marital stability and satisfaction. Race/ethnicity, class, and socioeconomic status have shown mixed results in predicting marital quality outcomes. Growing up in a low-resource home, a single-parent home, or in a home in which parents divorced, however, can put individuals at greater risk for marital dissolution. Additionally, family of origin factors such as unhealthy patterns of thinking, mental illness, communication skills, parents'/friends' approval of dating and potential marriage partners,

enmeshment with/autonomy from the family, school/work stress and resultant spillover, debt, health, and functional/dysfunctional interactions with family members can each exert an influence on dating relationships and future marital quality, stability, and satisfaction.[31-37]

Individual traits and behaviors

Multiple individual traits and behaviors have been identified as liabilities or assets to the development of healthy marriage relationships. These liabilities and assets are primarily forged in the fire of adolescent and young adult dating experiences. Some individual trait and behavior liabilities that predict lower marital quality, stability, and satisfaction include: difficulties managing stress, impulsiveness, self-consciousness, unregulated anger and hostility, untreated depression and other mental health disorders, chronic irritability, and dysfunctional beliefs. Assets found to be predictive of healthy relationships and marriages include: being an extrovert, flexibility, adaptability, and/or assertiveness; as well as, exhibiting high levels of self-esteem, commitment, and an ability to love.[38,39,40] Low-resource populations can be particularly vulnerable to reduced assets and increased liabilities due to the additional stressors and strains they experience.

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Couple interactional processes

Healthy marriages are established through healthy interactional processes that evolve during dating. It is generally the similarities (e.g., values, beliefs, interests) among romantic partners, not the differences that are the most predictive of marital quality, stability, and satisfaction. Interactional history (i.e., acquaintance, premarital sex, premarital pregnancy, cohabitation, dating violence) and processes (i.e., communication, conflict resolution, consensus building) are some of the more important premarital predictors of marital quality, stability, and satisfaction.[41-44]

Synthesizing the Research: Recommendations for Healthy Dating that Leads to Healthy Marriages

The information presented in this fact sheet highlights general factors that shape beliefs, attitudes and behaviors with regard to what healthy dating and marriage relationships look like. Functional or dysfunctional relationship knowledge, attitudes, and skills are the result of this shaping process. As a result, stakeholders such as researchers, practitioners, educators, and policy makers share a unique responsibility to provide evidenced-based healthy dating and marriage information and programming.

Meeting needs

Central to this shaping process is an understanding that individuals want to maximize the meeting of their own needs and that the meeting of their needs is the primary motivation for almost all behavior. When individuals learn how to meet their own needs in healthy ways, they can then help others learn to meet their own needs successfully and thus contribute to the development of healthy dating and marital friendships.

3 Cs: Commitment, Communication, Conflict Resolution

National and statewide studies indicate that commitment, communication, and conflict resolution are important interactional processes of quality, stable, and satisfying dating and marriage relationships.[45-48] Developing a deep friendship is the overriding goal of these processes.[49-50]

Commitment

Commitment in dating is similar to commitment in marriage, which consists of several components such as sharing a positive view that the friendship will last, being dedicated to the future of the friendship in spite of the inevitable "ups" and "downs" of relationships, and a willingness to make sacrifices so the friendship can be maintained and grow.[51,52]

Positive Communication and Conflict Resolution Strategies

The development of a positive interactional system for communicating, negotiating conflict, and showing and receiving fondness, admiration, and respect is critical to the development of healthy dating and marriage relationships.[53,54,55] When economic disadvantage is present, as is the case for the majority of low-resource individuals and families, the ability to communicate and resolve conflict effectively can be greatly reduced.[56]

Positive Bonds (Friendships)

Healthy dating and marriage relationships are characterized by a strong friendship. The following is a brief synthesis of the major components of strong friendships that stakeholders may want to consider as they develop programming to promote healthy dating relationships that can lead to healthy marriage relationships.[57]

- **F**ocus on Friendship - A strong friendship is the key to lasting and successful relationships.

- **R**ituals - Positive rituals are the intentional practices couples use to regularly connect with each other.

- **I**nteraction - Positive interaction is the major predictor of relationship quality, stability, and satisfaction.

- **E**xpectations - Expressing explicit, realistic expectations helps to ensure clear communication of implicit needs and desires for both partners and to temper dysfunctional beliefs and myths.

- **N**urture - Consistently nurturing the friendship reminds couples that both interpersonal and intrapersonal change will occur across the course of the dating and marriage relationship.

- **D**isclosure - Disclosure reinforces the critical need for couples to continue to share thoughts, feelings, and desires with each other.

- **S**kills - Acquiring new relationship knowledge and skills is an ongoing practice of healthy individuals and couples.

- **H**ealing - Healing is a consensus attitude couples adopt about restoring intimacy as quickly as possible when conflict arises or trust breaks down.

- **I**ntimacy - Intimacy includes all the specific practices couples create in their marital culture that increase their friendship and feelings of closeness with each other.

- **P**ositivity - Punctuating the positive is a mental, emotional, and behavioral choice couples make moment-by-moment, hour-by-hour, and day-by-day

to stay in positive energy with at least a 5-to-1 positive-to-negative interaction ratio.[57]

Conclusion

While there are still some challenges that must be overcome with regard to healthy marriage and relationship education programming and its effectiveness, researchers, educators, and practitioners are honing in on the specific factors of healthy dating that can lead to healthy marriages. The information presented in this fact sheet reveals many of the factors youth and young adults, along with the stakeholders who work with these populations, will want to be aware of to help build healthy dating friendships that can lead to healthy, long-term marital friendships. Some of the broad steps necessary to move forward in the promotion of healthy dating that leads to healthy marriages include: employing comprehensive programs with research-centered content containing the knowledge, attitudes, and skills needed to build successful friendships; mapping programs to specific targeted outcomes; and using appropriate evaluation methods to measure program effectiveness. When youth and young adults learn to make informed and intentional choices to build healthy friendships, they are more likely to learn to date in healthy ways and to create and maintain healthy marriages.[58]

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* Note: Larson and Holman have done the most long-term and comprehensive research on the premarital predictors of quality, stable, and satisfying marriages. Their research also represents a synthesis of previous research.

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