Deteriorating Relationships

The optimism of newlyweds belies what is known about marital deterioration and divorce. Approximately 90 percent of Americans will marry at least once, and it is estimated that at any one time 20 percent of all marriages in the United States are significantly distressed. Given 56 million married-couple households in 2000, that is approximately 11.2 million marriages at risk of dissolution at any one time. Approximately 50 percent of first marriages in the United States end in divorce, and another 10 to 15 percent end in permanent separation. For those remarrying, the rate of dissolution is approximately 10 percent higher. Dissolution rates are harder to pinpoint for relationships without legal documentation (e.g., couples whose marriages deteriorate without divorce decree, same-sex partners who cannot legally marry, and partners who cohabitate). This entry provides an overview of relationship deterioration research, including known predictors, typical trajectories, and changes across transitions such as parenthood. The entry also provides a broad review of the literature on recovery from deterioration, including a review of clinical interventions and spontaneous recovery.

Typical Trajectories of Relationship Deterioration

Early studies attempting to assess the normative trajectory of marital satisfaction relied upon cross-sectional data from spouses married for different lengths of time. Studies in the late 1960s and early 1970s suggested that marital satisfaction followed a U-shaped path, with newlyweds having the highest levels of satisfaction, followed by steady declines through middle age, and recovering to near-newlywed levels following the empty nest period. Cross-sectional data can be misleading, however, because the data being compared are snapshots in time gathered from separate cohorts rather than the trajectory of a single cohort (data collected from 65-year-old couples today do not necessarily predict what will happen for 35-year-old couples 3 decades from now). In contrast, more recent longitudinal studies have shown a steady and linear decline in satisfaction over time. Other studies have found substantial variability in individual trajectories, with many couples rapidly deteriorating over the first 4 to 7 years of marriage and others sustaining high levels of relationship satisfaction over time. Approximately 10 percent of couples report increasing satisfaction over the first 4 years of marriage.

The Dissolution Process

Steve Duck has described relationship deterioration as involving several dynamic processes. For example, intrapsychic processes involve one or both partners reflecting privately on dissatisfaction with the relationship. Although women typically tend to brood about declines in communication, men tend to focus on the absence of valued behaviors (e.g., the preparation of favorite meals) or responsibility for domestic duties. Dyadic processes involve the weakening of the relational culture through failure to uphold established patterns (e.g., no longer kissing each other goodbye or hello, forgoing after-dinner conversations, and other relationship-defining rituals). Social support processes involve the dissatisfied partner sharing complaints with others to enlist support and empathy. If partners decide to part, then grave-dressing processes occur during which the partners construct a narrative that makes sense of the deterioration. Finally, resurrection processes involve each person moving toward a future without the former partner.
**Trajectories Across Transitions**

Relationships are more likely to experience deterioration during times of transition. However, partners who successfully support each other through stressful transitions often report increased closeness. Stressful transitions include parenthood, the empty nest, and retirement, as well as acute and chronic circumstances such as disability, disease, and job loss. Researchers have found variability in couples’ responses to stressful transitions. Most couples experience temporary declines in relationship satisfaction; for some, however, satisfaction improves.

Across the transition to parenthood, studies show variable trajectories. Some studies show 40 to 70 percent of couples report increased conflict and a decline in satisfaction. During the same transition, 33 percent of wives in another study reported stable or increased relationship satisfaction. Yet another study identified four typical trajectories for parents on scales of love, conflict, ambivalence, and maintenance: accelerating decline (5–16 percent of the sample experienced a period of relative stability followed by precipitous decline), linear decline (23–48 percent experienced steady decline), no change (22–47 percent), and modest positive increase (20–35 percent). Although trajectories vary, the central tendencies indicate linear deterioration. Couples that are more satisfied entering the transition to parenthood and that have better communication and relationship maintenance skills weather the transition better. Also, some evidence suggests that maintaining regular daily contact is characteristic of resilient couples.

**Measuring Relationship Deterioration**

Relationship deterioration is characterized by increasingly dysfunctional interaction patterns and increased susceptibility to a range of physical and mental health problems. Factors that have been found to contribute to relationship deterioration include severe dissatisfaction, emotional distance, frequent negative interaction, negative communication styles, perceived availability of alternative partners, and the absence of an extended social network. Other traits associated with greater susceptibility to relationship deterioration include neuroticism, defensiveness, and parental divorce. Predictors can be categorized as involving cognitions, communication, conflict, context, and commitment.

**Cognitions**

Several studies have examined the effects of idealistic beliefs on relationship health. Within a sample of newlyweds, couples with positive marital behaviors (e.g., observed skill at communicating about marital problems) and positive attributions (e.g., viewing the partner in a more positive light) benefited from having high expectations about marriage. However, for those couples demonstrating more negative behaviors and attributions, higher relationship expectations predicted steeper declines in satisfaction—perhaps due to greater disillusionment in the absence of effective coping skills. It appears that holding high expectations contributes to relationship deterioration when those expectations are unrealistic.

Compared to happy couples, couples at risk for deterioration are more likely to endorse unrealistic beliefs about relationships. For example, distressed spouses are more likely to believe that disagreement in any form is destructive, that their partners are unlikely to change, and that rigid gender roles are desirable. Researchers have found a link between the number of unmet relationship standards and negative affect (e.g., anger), blame, and hostile communication styles. Another cognitive style linked to deterioration is a tendency to explain partner’s negative behavior in conflict-promoting ways. For example, attributions such as “she rejected my sexual advance because she doesn’t love me” or “he doesn’t share his worries with me because he doesn’t trust me” lead to increased conflict in subsequent encounters. This cognitive style is related to less effective problem solving with more displays of negative affect and steeper declines in marital satisfaction. In the case of intimate partner violence, aggressive individuals use verbal and physical aggression to express anger when their partners fail to meet their expectations.

**Communication**

Researchers have found a clear distinction between distressed and nondistressed couples in
the negativity of their communication. Distressed couples tend to engage in escalating negative communication patterns that often lead to significant emotional withdrawal and preclude effective problem solving. For example, the demand-withdraw pattern is common among distressed couples (interactions in which one partner’s demands for change are met with increasing withdrawal by the partner). Withdrawal tends to elicit escalating demands for change, resulting in even more withdrawal. Andrew Christensen has studied this phenomenon extensively and found it to be a significant predictor of relationship deterioration. A similar pattern, harsh start-up, occurs when partners begin a discussion with criticism or sarcasm. Research by Gottman has demonstrated that the quality of a couple’s start-up predicts the quality of the entire interaction, which in turn has been repeatedly associated with marital deterioration. Another significant predictor of deterioration is negative affect reciprocity, a pattern in which partners engage in long, escalating tit for tat sequences of negative behavior (e.g., criticize-defend). Distressed couples appear to have great difficulty exiting these negative sequences. Researchers have identified negative affect reciprocity as one of the most consistent correlates of marital dissatisfaction.

Within a closed system (all predictors and outcomes already being known), statistical models can be constructed from which dissolution and divorce can be predicted with a great deal of accuracy (ranging from 80–94 percent) based on oral history interviews and observational coding of problem-solving interactions. Gottman has identified four communication patterns that predict marital deterioration: criticism, contempt, defensiveness, and stonewalling. These predictors form a cascade of increasing deterioration—the more present, the greater risk of divorce.

1. Criticism. Unlike a complaint that addresses a specific behavior, criticism targets a spouse’s personality or character. Doing so limits the partner’s ability to respond and instead invites defensiveness and escalating negativity. Criticism pollutes the communication stream by making it virtually impossible to hear the underlying complaint.

2. Contempt. Contempt is feedback given with the intent to insult and/or psychologically abuse the partner (e.g., sarcasm, cynicism, name-calling, eye rolling, sneering, mockery, and hostile humor). Its toxicity lies in the conveyance of disgust, heightening conflict rather than resolving it. Contempt, especially for wives, is the best single predictor of divorce. Husbands’ contemptuous facial expressions have been found to predict the number of infectious illnesses wives will suffer even 4 years following an interaction.

3. Defensiveness. Defensiveness occurs when one partner defends against complaints and criticisms. Defensiveness escalates conflict because it fails to address the underlying complaint.

4. Stonewalling. Stonewalling emerges when conflict escalates to the point where at least one partner has physically or emotionally disengaged. The silent treatment, monosyllabic answers, and physically removing oneself from the room are types of stonewalling that lead to further relationship deterioration. Although gender differences are not universal, stonewalling tactics are more common in men.

Conflict

Couples inevitably encounter conflict—the ways that couples manage that conflict predict relationship satisfaction. Although some conflict is necessary to address problems and facilitate change, conflict can easily overwhelm a relationship, leading to deterioration. Although dissatisfying in the short run, nonhostile conflict has been associated with long-term gains in relationship health. At the same time, conflict occurring at a rate greater than approximately 20 percent of interactions predicts relationship decline.

Gottman has identified three types of conflict styles (volatile, validator, and avoider) common in stable marriages (those likely to remain married) and two types (hostile and hostile-detached) common in unstable marriage (those likely to divorce). Volatile couples demonstrate high levels of both negative and positive affect, and their interactions are characterized by a great deal of mutual persuasion. Validator couples tend to discuss issues more thoroughly and work toward compromise. Avoider couples tend to avoid conflict, most often resolving issues by agreeing to disagree. In all three, there is a reasonable balance between conflictual and positive interactions (roughly a ratio...
of five positive to every one negative interaction). Hostile couples engage in hostile and defensive conflict. In hostile-detached couples, spouses remain detached and emotionally uninvolved with each other, engaging only in brief bouts of attack and defensiveness.

Comparison of same-sex and heterosexual couples indicated that frequent conflict contributed to deterioration in both types. Conflict over intimacy and power were the sources of conflict most likely to result in lower levels of relationship satisfaction.

A partner’s ability to accept his or her partner’s influence also predicts relationship quality. During problem-solving interactions, some husbands escalate the level of conflict (considered rejecting influence), and others maintain the conflict at a steady level (accepting influence). Husbands who did not escalate the conflict (while also not withdrawing from it) showed better relationship outcomes. In contrast, subsequent research has shown that in domestically violent relationships men do not accept influence from their wives.

Researchers have found that as many as 74 percent of couples seeking marital therapy have been physically aggressive within the last year, yet fewer than 5 percent report physical aggression as a specific problem. Even mild, infrequent aggression has been associated with negative individual and relationship outcomes. Intimate partner violence (perpetrated by both men and women) is associated with several factors that contribute to relationship deterioration, including physical injury, fear, depression, and post-traumatic stress disorder. Intermittent and unpredictable abuse precipitates relationship deterioration by eroding trust, intimacy, and emotional support. Intimate partner violence is a strong predictor of relationship decline even after controlling for stressful events and negative communication.

Data indicate that economic stress is also associated with marital deterioration and increased marital conflict. Studies also find the use of alcohol and other drugs is significantly related to intimate partner violence and marital deterioration. In addition, the stress of incarceration can be overwhelming. Intimacy is disrupted due to limited contact and the problems associated with accusations and assumptions of infidelity. Economic uncertainty increases with the loss of income during incarceration and subsequent problems gaining employment once released. Some researchers have suggested that studying the struggle between couples and their environments is at least as important as studying the interpersonal struggles that couples face in order to understand the full range of factors involved in relationship deterioration.

**Commitment**

Commitment affects several aspects of couple functioning that predict dissolution. Theory identifies two main components of commitment, personal dedication (the degree to which partners are intrinsically committed to each other) and constraint (the conditions that make it more difficult for a partner to leave—such as finances, children, and a lack of alternative partners). Couples at risk for deterioration are those who demonstrate a commitment pattern that is low on personal dedication but not necessarily low on constraints. This pattern is apparent even in newlyweds, with low initial commitment levels serving as substantial predictors of eventual relationship dissolution.

**Context**

Researchers have also begun to explore the effect of context on relationship deterioration. For example, research on diary entries reveals that on days that couples have high levels of general stress and competing demands, they are more likely to have more stressful marital interactions. Similarly, data on work spillover suggest that arguments at work are related to arguments at home.

The treatments for marital deterioration that have most consistently demonstrated efficacy include Traditional Behavioral Couple Therapy, Cognitive Behavioral Couple Therapy, Emotionally Focused Couple Therapy, and Integrative Behavioral Couple Therapy. Studies have shown that couple therapy can be an effective treatment for relationship discord, consistently outperforming no-treatment control conditions. In short, these treatments result in better outcomes than seeking no treatment at all. However, couple therapy does not produce clinically significant change for all couples.
Slightly fewer than half of treated couples experience a reverse in deterioration that moves both partners from the distressed range into the nondistressed range. For those couples who improve over the course of therapy, as many as one third continue deteriorating posttherapy and have relapsed by 2-year follow-up. Treatment effects tend to be well maintained at 1-year follow-up, suggesting that prevention programs based on yearly check-ups may prove useful in maintaining therapeutic gains over time by keeping deterioration at bay.

Donald Baucom and his colleagues have reviewed empirically supported couple and family interventions. Across more than 20 outcome studies, they found no evidence of an appreciable level of spontaneous recovery among couples placed on a waiting list for marital therapy. However, one research team discovered what does appear to be spontaneous recovery by using data collected from over 5,000 adults interviewed in the late 1980s. When asked to rate their marriages 5 years later, two thirds of those unhappy marriages that avoided divorce had become happy. Focus groups held with 55 of the formerly unhappy spouses found that many had experienced extended periods of marital unhappiness, including alcoholism, infidelity, and depression. Although approximately one third of those couples had sought marital counseling, approximately two thirds experienced some level of spontaneous recovery. These findings warrant further research to determine whether the pattern of marital deterioration in community samples is distinct from those of clinical samples or whether spontaneous recovery may exist only as a function of imprecise methodology.

**Need for Prevention Strategies**

As relationships deteriorate, the damage can become increasingly irreversible. Over time, negative patterns of interaction typically become entrenched and thus resistant to change. Couples who experience severe and prolonged distress demonstrate low motivation to pursue change in the relationship, hence have poor to modest rates of long-term success with intensive couple therapy. Similarly, when affection is low, such as minimal tenderness or infrequent sexual intimacy, couples typically respond more poorly to therapy.

After detecting serious marital difficulties, couples often delay seeking help for an average of 6 years during which time the relationship progressively deteriorates. Long-established distress predicts poor response to couple therapy. Hypothesizing that better results may be achieved through earlier interventions, some researchers have established brief relationship modules for at-risk couples. Various relationship education programs have been shown to help moderately distressed couples improve their communication and relationship satisfaction—even at a 2-year follow-up.

James Córdova has developed a prevention program modeled after the regular physical health checkup, called the Marriage Checkup. The Marriage Checkup is comprised of a pair of sessions beginning with a thorough assessment session (utilizing empirically derived predictors of relationship deterioration) followed 2 weeks later with a motivational feedback session. During the feedback session, the therapist provides a succinct history of the couple’s oral history, explains scores on marriage questionnaires, summarizes the partners’ abilities to problem solve and affectively communicate, and uses motivational interviewing to make recommendations tailored to the couple’s specific areas of concern. Results from both an open trial and a small randomized control trial have demonstrated increased relationship health in both husbands and wives immediately and at a 2-year follow-up. A larger study is currently underway.

Marriage and relationship education (MRE) includes programs offered by private professionals, clinical researchers, and lay practitioners. One meta-analysis of MRE programs found that the programs’ effects on marital satisfaction-quality were modest but significant. One such program, Prevention and Relationship Enhancement Program (PREP), has shown evidence of decreasing negative interaction, lowering rates of breakup and divorce, and increasing levels of relationship skills maintained up to 5 years following the training. In one sample, couples who completed PREP had a divorce rate of 3 percent compared to 16 percent for control couples, a promising finding. Relationship scientists are still discovering prevention and intervention strategies to help individuals select appropriate mates, to keep the relationship healthy from the beginning, to repair relationships when
problems arise, and to dissolve amicably when deterioration occurs despite best attempts.

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See also Couple Therapy; Integrative Behavioral Couple Therapy; Prevention and Enrichment Programs for Couples; Prevention and Relationship Enhancement Programs (PREP); Repairing Relationships; Rewards and Costs in Relationships; Satisfaction in Relationships; Self-Concept and Relationships; Turning Points in Relationships

Further Readings


Phase or Stage Models of Relationship Development

Phase or stage models of relationship development recognize that romantic couples and friendships move through and between phases at different rates of speed. Some romantic couples, for example, describe their relationship as beginning with love at first sight and accelerating quickly to a committed relationship or marriage. Others describe their relationship development as more gradual, developing a friendship first, entering a prolonged courtship, and moving slowly to marriage. And some couples that had romantic potential do not progress beyond relatively superficial interactions; they remain at the level of casual acquaintances if professional or social networks keep them in contact or they terminate the relationship entirely if no external factors necessitate continued interaction. Thus, the goal of scholars who offer models of relationship development is not to specify how soon into the relationship any particular transition is likely to occur. Rather, their goal is to identify patterns of emotions, attitudes, and behaviors that distinguish one phase of development from the previous and the subsequent phase. The three models summarized below are widely accepted illustrations of the phases or stages of development.

One of the first models concerned with the phases of development in friendships and romantic relationships was published by George Levinger in the early 1970s. His model of pair relatedness describes levels of increasing connection, interdependence, affection, and commitment as the dimensions of relationship development. The four levels of relatedness include: (1) zero contact and zero relatedness, (2) unilateral awareness where the