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Marriage Enrichment: A Preventative Counseling Program Designed to Attain Marriage Potential

Roger Gene Wittrup
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MARRIAGE ENRICHMENT: A PREVENTATIVE COUNSELING PROGRAM DESIGNED TO ATTAIN MARRIAGE POTENTIAL

by

Roger Gene Wittrup

A Dissertation Submitted to the Faculty of the Graduate College in partial fulfillment of the Degree of Doctor of Education

Western Michigan University Kalamazoo, Michigan December 1973
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Roger Gene Wittrup
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CHAPTER I

INTRODUCTION

THE PROBLEM AREA

Marriage and family counselors accept as one of their functions the re-education of married couples concerning their marital roles and the healthy interpersonal married relationship. These counselors assume that through educating couples as to these roles they can, not only rehabilitate, but somewhat prevent the additional dysfunctional effects of poor marital adjustment (Haley, 1963; Jourard, 1964; Laing, 1964; Greene, 1965; Wise, 1966; Truax and Carkuff, 1967; May, 1967; Rogers, 1972).

The importance of actually retraining the couple to attain a sensitive interpersonal relationship is suggested by Bach and Wyden (1969). They insist that one requirement is to create a constructive rather than a destructive pattern of relationship through actual educational processes. Berne (1961, 1963, 1964, 1966, 1971) has suggested a system of analysis of what he refers to as transactions, or the communication, both verbal and non-verbal, carried on between human beings. He suggests that through intellectual analysis of human
behavior and presentation of more positive behavior people show less dysfunction in interpersonal relationships.

Clinebell (1965, 1972) recognized the importance of community support in assisting persons in positive self-fulfillment. He contends that only through the strength of that supportive relationship can the person be assured of the essential new security essential for mental health. Another focus of this same process is developed in the alternative model proposed by Curran (1952), in which he sets out the stages of what he calls self-integration, or a developed sense of wholeness. Curran believes that the end result of all counseling should include positive attitudes, self-acceptance, and self-knowledge (p. 92). Both Clinebell and Curran designate one as being a need for support, either from the counselor or from the group or community in attaining what Maslow (1968) has referred to as a "positive self-regard" or that sense of being in harmony in life and with oneself. One conclusion drawn from these inferences is that the desired atmosphere of positive self-regard can be founded within a sense of community and can be a central focus of the development and implementation of a training manual dealing with marriage and family.

In the field of group counseling and psychotherapy, Gazda (1971) has developed a theory which includes the
stages through which each group tends to develop on various schedules. He terms these stages: (1) Exploratory Stage; (2) Transition Stage; (3) Action Stage; and (4) Termination Stage (p. 33). The Exploratory Stage is the time of agreeing upon the objectives of the experience by the group members. The Transitional Stage includes the period of time when one or more members begin to disclose significant personal information. The Action Stage is the time during which the members are intimately involved in the process of the group and its objectives. The Termination Stage is the natural or imposed concluding stage when the group begins to lessen self-disclosure and moves toward disclosure termination. Disclosure is defined by Jourard (1964) as the learning of mutual characteristics, the different needs that exist between persons, and the extent to which the moral and ethical differences affect those needs and characteristics. Therefore, one problem is to implement a program for married couples that incorporates self-disclosure within a structure of Gazda's four-stage group model.

General agreement exists concerning the relative importance of the group in giving the essential support. Lifton (1966) points out that a mass of persons does not become a group unless there is an awareness of the deep dependence each member has upon each other group member and a determination to accomplish a given goal (p. 25).
He also believes that the group must, in some way, attain a sense of security, a sense of well-being, an honest situation to attempt new behavior, and an opportunity to learn new or alternative behavior (pp. 25-26). One assumption from Lifton's conclusion is that the group must be more than a mere gathering of persons; rather, a group is that within which behavior and attitudes are learned and relearned in a condition of relative security.

One question is apparent: What is the difference between education and therapy? Symonds (1941) makes the differentiation by defining education as an attempt to "help the individual adjust to the environment . . . form . . . habits and skills which enable him . . . Therapy . . . is concerned with helping an individual to work . . . a personal reorganization . . . so that he may find it possible to become educated" (pp. 49-56). Symonds is making a distinction between education and therapy as two parts of the same objective; Maslow's positive self-regard (1968).

Another issue is whether to develop a model which is not therapeutic but educational in orientation. Educational designs do not necessarily mean that therapy cannot be present, but rather it is not to be the intentional central focus of a preventative counseling program for married couples. A focus issue limits such a model
to the educational, preventative attributes of a program rather than the desired personality change of traditional therapy group models.

Although the diagnosis of marriages has become a therapeutic skill (Lederer and Jackson, 1968; Laing, 1964, 1969), this skill has not been consistently used in the preventative, educationally orientated program. However, Lederer and Jackson (1968) believe that couples should consider what they call "marital checkups" (pp. 360-361) or an evaluation conducted by a professional of the existing marriage while it is functioning and not yet pathological, that is, serious marital malfunctioning. Through this check-up it is possible to learn new interpersonal skills and set up new goals without the impetus of a precipitating crisis. Their reasoning is that every couple develops habits which in time can cause the marriage to become dysfunctional. As soon as these new habits can be evaluated and changed, a new sense of marital "positive self-regard" (Maslow, 1968) developed and an enriched marriage with new goals determined, the better for each spouse.

Unfortunately, couples can find it difficult to conduct this check-up without the aid of a professional marriage counselor (Greene, 1965, 1970; Haley, 1973). Often, it is necessary for the counselor to develop what Haley (1963) calls a strategy (1963, p. 23) or a system
of defining the relationship in order for the couple to learn new behavior. Ellis and Harper (1961) have developed what they call Rational Emotive Therapy (RET), which has as its intent the teaching concerning the learned irrational ideas and how rational ideas and behavior can be implemented (p. 25). This RET model takes upon itself the role of educator for the persons, in this case the married couples, which is comparable to the strategies put forth by Haley. Their counseling effort is not just upon a skilled diagnosis, but rather a treatment through education of the married couple. In that way, the couple is taught to be aware of destructive, irrational behavior which does and can potentially limit the marriage goals in the future. Therefore, the strategy would treat not only the present condition but be preventative in orientation.

One task, then, is to develop a program that includes a specific strategy and goals which would assist couples in prevention of future marital problems. Additionally, an educationally based program must be developed that will give an opportunity to serve the couple in setting goals and new habits that serve to support the potentially enriched marriage. Finally, a program must be implemented that can be used in large groups of five to ten couples so that the cost would not be prohibitive, and also take advantage of the influential nature of the
The group, rather than the counselor, can serve as a facilitator for change through the group's empathy (Katz, 1963), or feeling "as if we were experiencing someone else's feelings as our own" (p. 3). Through this facilitation of empathy, the couple tends to be able to share and learn in a relatively non-threatening atmosphere.

The failure to attain a functional program does not imply that the goal is unattainable. Rather, that failure may in large part be reflective of the difficult nature of the task, the strategy and educational process. Perhaps, in some small measure, even the failure of a program may encourage others to develop additional strategies. Such a rational conclusion assures the need for a program strategy with one goal to be a cognitive effort for others to evaluate and correct. In no way does a program assume a final stance, but rather the first step.

REVIEW OF RELATED RESEARCH AND LITERATURE

The research and literature pertinent to this study were divided into three areas: the philosophical condition of present marriages, psychological theory and marriage counseling theories used for rehabilitation of marriages. Each area will be considered separately.
Philosophical Condition of Marriages

Bensman and Rosenberg (1963) reviewed the change from the feudal social system of the middle ages with its pre-determined social roles in an agrarian society to modern urban society and suggested that a momentous change has taken place. Socialization, or the transmission of a culture or sub-culture to a new generation, is seen as no longer static but rather in constant flux. Bensman and Rosenberg believe that with the change, the responsibility for socialization changed from the culture-subculture to the family as the agent for the socialization (p. 104). In addition, they contend that the husband and wife are forced to re-evaluate their relationship and to become more cognitive in their planning of that socialization. The standards, instead of existing in the church or state, must now exist within the couple in a mature, more responsible manner. Unless this new ideal is reached, the marriage tends to falter under the demands of the socialization process.

Packard (1972) sets forth a proposition that poor socialization techniques have caused the American people to suffer what he calls "torn roots" (p. 12). By torn roots, he means the sense of being without a continued process of socialization such as hometowns, old friends and communities until a person feels as if he belongs nowhere. Instead of the extended family structure
(aunts, uncles, and grandparents under one roof or in close proximity), the normal family structure is called nuclear (one or both parents and any children under one roof) which has great mobility and suffers from torn roots. Pressure is exerted for the couple to serve as socializers for the children and for themselves, but the end result, according to Packard, is a personal demoralization, a lost sense of well-being.

Glasser (1972) defines this socialization change as a somewhat positive change. He states that America has seen an end to what he terms the Survival Society (p. 13) that lasted 10,000 years, which had as its goal, just to survive both economically and physically. The Identity Society took as its goal the answer to this question: "Who am I?" Glasser contends that society no longer needs to direct its attention toward survival but rather toward an identity of being a person individually. One assumption of Glasser's theory is that the socialization process is carried on by individuals, dyads (two persons: a married couple), and nuclear families in orientation. One result of this change is the importance of assisting the individual, dyad, and nuclear family units in the socialization process, whereby social roles can be determined and carried out.

Mead (1970, p. 1) subdivides the socialization differences into three cultural differences: (1) the
post-figurative, where the young learn from the elders
(survival society model); (2) the cofigurative, where
peers are the educators; and (3) the prefigurative,
where the elders learn from the young. A process of
socialization differs with each, in the relative worth
of the past, of what Packard (1972) calls the roots of
behavior. When the culture is learning only in adaption
to change, the ability for consistency in socialization
is affected.

In both the cofigurative and prefigurative, the chil-
dren do not view the complete cycle of marriage provided
when the elders are the educators as a consequence of the
extended family. Children are not able to consider the
cycle of marriage, from the honeymoon to death, because
they only view one set of parents through the developmen-
tal years, ages one to seventeen. Extended families did
provide models for both feminine and masculine roles,
reinforced by three to four generations in close prox-
imity. But the nuclear family provides limited role
exposure, hence the lack of proper socialization.

Educators need to question whether this right to
determine the direction of socialization belongs to them.
Tournier (1947, p. 118) senses that permitting life to be
accidental is to permit life to return to a concern about
mere existence, what Glasser called a survival society.
What Tournier fears is that the gross result of poor
socialization is "bitterness, envy, desire for revenge, and strife, so that the chaos is increased . . . ." (p. 18). He does not desire a return to chaos nor a survival-concern that has little positive future.

Studies concerned with survival and aggression (Storr, 1970; Lorenz, 1967) of man's socialization fears make man a social isolate fighting for survival, a rather unattractive goal for man.

An opportunity to assist couples in planning positive life experiences for the dyad and nuclear family should include sufficient structure so as to lessen the chaotic effect of indefiniteness, but yet provide sufficient planning freedom for the couple to include individual differences and values.

Psychological Theories

Freud (1966) developed a psychoanalytic theory which dealt primarily with intra-psychic conflict, which he determined limited a person's ability to be functional and adaptive. Freud's major concern was with the person's own mental functioning as primarily defining the person's maladaptation (p. 448), and refused to be concerned with the interpersonal dynamics of the person being interviewed. The German word, "Weltanschauung," to which he addressed himself in his twenty-fifth lecture (p. 662), is defined best as "a view of the universe" (p. 622),.
which he viewed only as a one-way process, from the person's mind to the universe.

The question of drives which preoccupied Freud was interpreted by Jung (1957, p. 15) as having a social role which was shared with others in society. Jung believed that socialization is an enormous factor in man's emotions which goes beyond the limited view of Freud. He compared the effort to include the social dynamic in psychological theory as similar to Copernicus' determination to be free of mythological ideas. Jung (p. 57) continues by implying that to be bound by the biochemical process or protected by each person's psyche is to assume a limited stance in understanding man and his environment. Perhaps the complexity of social ills or the restrictive codes of Victorian Vienna stifled Freud's desire to expand the psychoanalytic theory.

A theme of social demands avoided by Freud was attributed by Horney (1945, p. 42) as creating neurosis, or intra-psychic conflict. This neurosis is determined by a tactical decision to deal with the menacing world, however subdivided. These strategies or tactics are unconsciously developed and incorporated into the personality. Therefore, Horney affirms that one role of the therapist is to determine the Weltanschauung, not only from the mind's view, but also from the manner in which the environment (universe) approaches the mind. Through
this determination, an understanding of the tactics and
strategies can exist and then, assist the patient toward
more positive forms of these tactics and strategies.
Such an understanding allows the mind to the adaptive
sequence.

A major revision of Freudian theory, Erickson (1959,
p. 166) constructs a series of life tasks with which the
individual is confronted. His epigenetic (life cycle)
diagram includes tasks from infancy until death as a
replacement for Freud's psychosexual stages. They
include: (1) trust vs. mistrust, (2) autonomy vs. shame
and doubt, (3) initiative vs. guilt, (4) industry vs.
inferiority, (5) identity vs. identity diffusion,
(6) intimacy vs. isolation, (7) generativity vs. self-
absorption, and (8) integrity vs. despaxiso (p. 166).
These stages correspond directly to social situations
ranging from the maternal person for stage one to man-
kind for stage eight. Perceptually, Erickson's effort
can be seen to retain the advances of Freud's theory but
integrate the theory into one theory of man's development.
Erickson perceives that each step is also a crisis con-
dition due to the change in the perspective of the world,
the weltanschauung. The infant sees a figure who gives
milk and protection or refuses those benefits while the
adolescent relates to a peer group which may or may not
assist in the adolescent's identity. Such recognition
of the expanding nature of experience (a wider world) along with the broader social sense expected.

Avoidance of anxiety is a behavior presumed by Sullivan (1953, pp. 350-359). The interpersonal context of anxiety-avoiding behaviors is assessed by Sullivan as an attempt to avoid a loss of self-esteem. He differentiates this anxiety as primary in understanding anxiety as an adaptive device. Behavior is, therefore, an attempt to reduce anxiety and cope with its energy, dysfunctional as that behavior may appear. Leary (1957, p. 59) has expanded the interpersonal theory into a theory about personality, which states that what is believed as being personality is actually "a multilevel pattern of interpersonal responses expressed by the individual (p. 59)."

For Leary, all behavior is aimed at the reduction of anxiety or what Sullivan calls a desire to avoid loss of self-esteem.

More recently, Glasser amplified (1965, p. 6) a therapeutic technique from a conceptualization of an interpersonal adaptive behavior. Reality Therapy, or the confrontation of a person with the actual behavior in a reality setting, proposes that a person must be assisted toward reality by learning that person's life experience, "weltanschauungs. Then, the counselor rejects the unrealistic behavior and proposes more realistic behavior. An educator's role is primary for Glasser to
complete the entire cycle of counseling, first to understand and then, to educate.

Rollo May (1967, p. 67) perceives that the assistance given to the person seeking help actually provides the person (patient, client, counselor) with the opportunity to be released from "compulsion of his inferiority feelings" (p. 67). A former behavior is replaced by socially acceptable behavior which in itself lessens the potential loss of self-esteem. As a person learns, a new perceptual role is learned, the weltanschauung becomes less threatening and more richly endowed with creative experiences. The enriched person is then more inclined to learn from the world around because that world is no longer fearful but friendly. What was assumed to be threatening (marriage, vocational choices, cultural experiences, recreation) is now seen as endearing life experiences. Therapy, in the form of assuring the person that he is safe to learn, will come before an educational experience.

Marriage Counseling Theories

Traditional treatment in the counseling relationship tended to be the psychoanalytic model of one-to-one, one therapist-counselor and one patient. Additional members of that patient's life were not normally permitted any role in that relationship. Various counselors have
proposed a new model of therapy, specifically dealing with marriage and the dyad itself.

Reasons behind the change are numerous, but center on the outcomes of individual counseling. Haley (1963, p. 15) estimates that there is increasing evidence that in individual counseling, when one spouse gets better (in terms of function), the mate will tend to develop dysfunctional behavior because of the previous balanced relationship. A relationship, Haley believes, is founded upon an implicit, communicated but not expressed, decision of the couple to relate in this dysfunctional manner which is considered by the couple as expected behavior. Changed behavior in one spouse can cause changed behavior in the other spouse, not necessarily a desired goal in counseling.

Expected behavior is termed by Lidz, Fleck, and Cornebsion (1965, p. 35) as homeostasis of the dyad relationship. This homeostasis can be manifested in numerous roles, i.e. schizophrenic partner, alcoholic partner, and depressed partner. Dysfunction within a homeostasis need not be any more severe than the "home-bound housewife," the wife who suffers through her dependent role with her working husband. Lidz (1965) contends that to facilitate a change in the wife, such as returning to college, without the husband's involvement, would necessitate some moderation in their homeostasis, their
marital roles. Because of this concern, Lidz advocates that both husband and wife, with their children, be included in counseling toward change in role and role perception. Another advocate of dyad counseling is Satir (1964). She proposed a term "conjoint family therapy" due to her shared concern that "we operate within multiple relationship systems, and our self-concepts and self-images are derived from the context of the system. . . ." (p. 179). Satir believes that the individual, as in individual counseling, suffers from limited awareness of his image, especially when not included in the counseling process. The spouse, in marital counseling, and the children, in family counseling, hold greater awareness of the individual's functioning than does the individual himself. One conclusion can be that merely assisting the individual through one-to-one counseling is not always the treatment of choice.

Ackerman (1966, pp. 42-43) envisioned the educational aspect of the dyad counseling process by formulating his counseling model. What Lidz calls homeostasis is defined by Ackerman as the person or persons who must be taught that a new way of adaption is a preferred alternative to their dysfunctional behavior. Instead of merely discussing with the negative aspects, such as depression, counseling must assist toward a formulation
of a healthy interpersonal relationship, particularly within the nuclear family structure. The formulation must include the dyad's level of achievement, definition of satisfactions, and goals for the marriage (Ackerman, 1958). Counseling must include an assessment of function, relationships, and future goals; then, the formulation can be given as an alternative to present dyad dysfunction.

Luckey (1964, p. 136) has conducted research concerning marital satisfaction and concludes that interpersonal relationships must be viewed as a result of role-perception created throughout life and supported by the spouse. Reinforcement by the spouse needs to be altered before the person can formulate a changed self-image and therefore a change in the basic marital relationship. In that alteration and formulation, one of the preventative goals is reached in that the couple is capable of dealing with the relationship in a healthy environment with healthy self-images.

One recollection is the concern of Haley (1963, p. 68) that a workable strategy must be implemented, to logically conclude that the model must include an educational formulation, a reflection of the advantages of the new formulation, and an educational process so that the goals might be reached. Marriage enrichment would implement the educational phase of traditional counseling as
presented by Greene (1970, p. 6) including: (1) the intrapersonal (within self), (2) interpersonal (with others), and (3) sociocultural (within the society). Enrichment is what Rogers (1972, p. 206) observed, "it is simply when each partner is making progress toward becoming increasingly his or her self, the partnership becomes more enriching."

Group Counseling Theories

Group counseling is in no way merely a substitute for individual counseling, but rather serves as an adjunct program to the individual counseling program. Bennett (1955, p. 220) considers that the counseling (therapeutic) effect is sometimes caused by the subtle recognition of the persons that their problems are not unique but shared with others. Subsequent tension reduction results, occasionally leading to a sense of self-acceptance, or as Sullivan (1953) views it, the person who is no longer terrified of the lost self-esteem. Bennett asserts that the group in and of itself creates a social situation similar to previous social situations where tension was greatest. The group member is able to live through the experience, thereby relearning a social role; that role then includes a self-direction and self-assuredness that enables a person to function.
The studies conducted by Gaskill and Mudd (1950, pp. 194-201) evaluate group marriage counseling programs and conclude that the group approach is an acceptable, somewhat preferred treatment of choice. Cartwright and Zander speculated that the group structure has solidified when a group has acquired a regularity in the interpersonal relationships among the group members. If the assumption by Gaskill and Mudd and Zander and Cartwright can be accepted, group marriage counseling, with the operating dyads present, is a group pre-prepared for cohesion. The couple knows each other and has a relative amount of trust in that partner. In that security, the partners are somewhat free to become what Cartwright and Zander describe as a solidified group.

One definition of this solidification is described by Glanz (1962) as being the amount of attention, desire for closeness, and verbal/nonverbal participation of group members. Glanz uses the word "cohesiveness" instead of solidification. Cohesion is a desired operating process in functional groups, particularly in groups most concerned with interpersonal relationships instead of intrapersonal concerns. The group does or does not operate according to the willingness of the group members to interact cohesively in an educational experience.

One advantage of group marriage counseling is that the individual knows at least one person intimately, and
therefore feels an automatic cohesion with that spouse. Rogers (1972) indicates that the person is able to feel less vulnerable to rejection because the individual senses the presence of another person within a group. Berne (1963, 1966) added that the group needs to define that relationship either in positive or negative aspects to avoid the initial ambiguity. Either positive or negative expression will create a relationship with the group members while apathetic expression (no interaction) is destructive of that group cohesion.

The modeling effect of the leader within the group is what Jourard (1961, 1964, 1966) calls the transparent effect of the group. Jourard (1964, p. 25) says that self-disclosure, the transparent self, is really the ability of a person to make known to another, particularly an important other. Instead of role-playing, Jourard believes a person must attain sufficient freedom within the group to disclose the person that he or she really is. Rather than repressing the human qualities, behind a role, the member or leader should feel free to self-disclose to the group.

Fromm (1951, p. 17) believes that the self-disclosure need not be words but may be gestures. Movements and gestures, either by the group members or leaders, communicate for Fromm the greater sense of interpersonal relationships. He calls these gestures and movements
a non-verbal communication system that everyone uses in everyday life. Group members can be what Jourard describes as either becoming a disclosing, rejecting, or apathetic member in our interpersonal relationships. A group leader may need to model non-verbal behavior that increases the opportunity for similar disclosure. Such behavior would solidify the group cohesion.

Muro and Freeman (1968, p. 395) submit that group counseling does have a natural setting in marriage counseling. They write, "Group techniques can be readily adapted as an effective vehicle for marriage counseling since marriages are concerned with group living. All the dynamics that apply to any group are at work in a marriage. . . ." (p. 395). Muro and Freeman believe that the group setting provides an opportunity for the couples to learn that their problems are not unique, and that resolution of problems can and does take place. An additional benefit of groups is that they serve to provide opportunities to try out new forms of behavior.

Guidance aspects of group counseling are emphasized by Gazda (1971, p. 62). He stresses the preventive aspects of the program, especially in the cognitive understanding of roles for preventive rather than curative goals. Members of marriage groups, given cognitive material, would tend to understand their roles and behavior from a learning rather than a therapeutic position. A
group can operate as an "enrichment group" by emphasizing both guidance goals developed by Gazda and growth through interaction goals as proposed by Muro and Freeman. The development of Marriage Enrichment Groups (MEG) would necessitate a system of educational presentations, a system of group experiences, and evaluations of the interpersonal relationships. Therefore, all three goals of counseling and guidance are used in the formulation and presentation of the Marriage Enrichment Group Program.

PURPOSE OF THE STUDY

This study is concerned with the question of whether a marital relationship can be improved as a result of learning certain marital skills, relationships, and marital behavior. Specifically, the intent of the program of study is twofold. The first is to develop a manual for implementation in a marriage enrichment group. Second, the degree of effectiveness of the model will be measured by case study methods both as an assessment technique and as an example of the program's utilization.

ASSUMPTIONS UNDERLYING THE PROGRAM

In the past, much research has been conducted on the condition of marriage in the United States and the relative changes in past decades, but done in such a way that indict the marriage, but give little assistance to the
marriage itself. Clinics and counseling agencies have placed a label "marital problems" on numerous social-psychological histories and attempted, often with only one partner, to implement marital change. The end results of such programs are questionable, but the Kalamazoo Child Guidance Clinic, among others, had requested a new positive program of marriage assistance for married couples. With this in mind, a series of propositions about such a program were developed.

Definition

Marriage Enrichment may be defined as a program designed to teach, facilitate, and persuade married couples toward self-determined, functioning potential development.

Basic Assumptions and Postulates

Assumption I: Marital roles are poorly defined through implicit decision-making, and therefore through explicit decision-making, those roles can be redefined. The basic assumption is made on the basis of clinical observations over an eight-year period. In counseling theory, the couple's awareness of their basis of conflict and its resolution creates a positive climate of fulfillment. This assumption is also based upon the belief that although the past relationship cannot be changed, the
present relationship is subject to change through relearning.

Postulate I-A: Desire for change depends upon the couple's perception of another kind of relationship as preferable to the present. Through the presentation of a positive model for change, the opportunity is offered for sufficient reviewing of the present relationship and evaluation of the new relationship.

Postulate I-B: Explicit decision-making on the part of the couple is a healthy exercise in self-determination relative to healthy role definition. The model itself should provide very explicit exercises which deal with realistic decision-making problems, but the learning through experience should provide a model for change and a perceived change in role fulfillment. By the very use of the dyad itself, the couple should be assured of maximum use of the training model.

Postulate I-C: Marital roles are individually determined rather than one general pattern; therefore, the individual pattern must be made explicit. The components that are variable are so great that what is important is the attempt to maintain a proper perspective of those roles. Those roles are determined: (a) subculturally through family ties, (b) through
experiences with other married persons, (c) decisions based on educational input, and (d) hidden agendas that are carried into marriage. Through explicit communication of roles, clarification and fulfillment become more positive.

**Postulate I-D:** Marital behavior is subject to change through direct negotiation as a couple in an atmosphere of positive growth. Instead of one individual attaining an insight alone through growth groups, the couple is provided a positive forum which allows great variances in desired marital behavior. The couple becomes the unit that is satisfied with the outcome rather than the therapist's evaluation. Value is placed only upon the decision of the couple that a certain behavior meets a given criterion, free from the particular values and moral decision-making of the therapist.

**Assumption II:** Marriage disharmony is due in part to a failure to settle essential marital roles and expectations. Resolvement of those roles and expectations through a series of exercises releases the energy necessary for the marriage to become "enriched."

**Postulate II-A:** Couples tend to carry the unresolved problems of their engagement period and early marriage into the marriage relationship itself. Depending upon the length of the unresolved relationships,
the marriage can appear without movement and growth
due in part to the couple's failure to initiate change.

**Postulate II-B:** Programmed groups create an atmos­phere for structured growth that relieves initial
anxiety and facilitates the couple's desire for
resolution of problems.

**Postulate II-C:** Strong leader control asserts
pressure for the utilization of program and pro­tects against tangential discussions. The leader,
along with the programmed text, creates the essential
conditions for positive growth.

**RESEARCH QUESTION AND GENERAL HYPOTHESES**

The essential research question of this study is:
Can a marriage enrichment group program be developed
which is perceived by the couple as assisting in develop­ing marital roles, communication and conflict resolution?
With this question, the following hypotheses have been
developed:

A marriage enrichment group program can be developed
for implementation.

The marriage enrichment group program will be
reported as effective by case studies of couples as
assisting them in the perception of marital roles.
Marriage enrichment will have an effect upon the home life of the married couple as perceived by the children.

Finally, marriage enrichment will be evaluated by the members as an experience they would want to recommend to other married couples.

LIMITATIONS OF THE STUDY

Ideally, a program should be conducted with married couples throughout the United States with various economic and social groups. However, the scope of this study will be limited to a group conducted in a psychiatric clinic which accommodates the average economic, social group.

One tangible result of limited research is the tentative conclusions gathered to infer to a larger population of married persons. Case studies reported are composed of middle-class, Caucasian couples in a Northern city. Mutual reason for referral was a recognition of marital role problems. All had received prior counseling with a child guidance clinic.

The MEG program was written for counseling with an out-patient population of married couples. Conclusions will be developed for application with similar married couples.
Self reports limit the degree of application due to personality variables found in the case studies. Conclusions would be enhanced if a video study could be conducted that would communicate additional material.

Finally, this study is limited by additional variables that cannot be reported nor actually observed. The actual impact of the program may be felt within the home, which is not open to observation. Subtle changes cannot be dependably reported by self reports due to the potential distortion of the marital partners due to image concern. Extensive group and home video-taping would be useful, but the financial and time considerations necessitate limitations on the scope of this study.
CHAPTER III

METHODOLOGY

DEVELOPMENT OF THE MARRIAGE ENRICHMENT PROGRAM

Programs for group implementation with married couples have been designed by Gordon (1970), Ellis (1961), Bach and Weyden (1969), Clinebell and Clinebell (1970), and Rogers (1972), and have been utilized in a variety of mental health settings. The number of potential uses of groups, as noted by these authors, is expanding. Married couples will have new opportunities to learn alternative behaviors and gain insights into their present behavior. Each author has had his own technique for creating an atmosphere for productive learning. These atmospheres have resulted primarily from their previous individual or dyad counseling experience. One major consideration in the design and development of a new program would be the implementation of similar criteria, namely, criteria based upon traditional marriage counseling. Greene (1970, pp. 257-259) suggests that there are many forms of marriage counseling, including: (1) crisis counseling, (2) classical psychoanalysis, (3) collaborative therapy (each partner treated by a separate therapist), (4) concurrent (same therapist...
seeing each individual), (5) conjoint therapy (couple seen together), (6) combined approach, (7) conjoint family therapy, and (8) marital group therapy. Each of these techniques has as its intent therapeutic intervention into troubled marriages. Depending upon the selection of technique, the outcome deals primarily with the interpersonal relationships between spouses and significant others, such as family and close friends. Greene (1970) will not treat individuals for marriage problems. He works only with couples because of the significance of the dyad relationship and marital roles. Because of the importance of role-learning and structured group support in such learning, this study will use the programed style of group experience.

Objectives for the Marriage Enrichment Program

Mager (1962) suggests that in order to develop an educational program, the instructional objectives should be clearly stated. His reasoning is that to determine the precise design, the outcome objectives must be understood by the designer. Mager uses three terms to define the objective: (1) a statement about behavior (visible activity by the learner), (2) terminal behavior (behavior to be shown at the end of the instruction), and (3) criterion used to evaluate change.
Operationally, the objectives then permit the programer to select and evaluate materials and content, to select members, and to summarize the results.

The general objective of this program is the improvement of the marriage relationship. The general hypothesis of this study states that cognitive input, skill manipulation, and resolvement of conflicts shall lead to amelioration of marriage relationships. Therefore, the immediate objective shall be that these concepts, skills, and roles will be learned.

Testing for objectives

The program text was divided into units so that each unit would be completed in a two-hour group instructional session. Such a procedure permits maximum learning while controlling the amount of fatigue for the group and leader. Additionally, the time between sessions permits the couples to attempt new behavior and then report back to the group. Without such time-units, this design would tend to discourage group support for new behavior.

A marital skills test was administered along with the Leary Interpersonal Check List, first as a pretest and then again as a posttest at the conclusion of the program. Immediate objectives (marital concepts, skills, and roles) could be evaluated according to Mager's (1962)
descriptive model: (1) behavior, (2) terminal behavior, and (3) criterion.

**Subject matter**

Due to the uniqueness of the MEG, there were no specific guidelines or standards upon which to determine what subject matter should be included in the MEG program. Additionally, the preventative aspects of the model previously described made determination of material difficult. Therefore, the program was developed using a trial and error method to determine subjectively the subject matter and methods. Logically, the subject matter and methods reflect the natural bias of the subjective determination.

Five premises were developed to establish the rationale for the subject matter and method selection. The first premise was that the couple must be mutually motivated to discover alternative behavior and insights from which to reflect upon present behavior. The second premise was that the couple must be given cognitive information about marriages and that discussion must be creative and positive in nature. The third premise was that the couples must use the group to attempt new forms of behavior and receive feedback if the couple is actually to change. The fourth premise was that the couple must be given rather specific assignments which explicitly
eliminate areas of conflict in order to learn conflict resolution. The fifth premise was that the couple must be given sufficient opportunity to make explicit (full, clear expression) rather than implicit (not clearly expressed) the immediate and long-range goals of their marriage. If these conditions were fulfilled, the conclusion could be stated that the tested couples would report an improvement of the marital relationship.

Lederer and Jackson (1968) suggest that a system which eliminates myths and substitutes acceptable behavior creates long-term change in marital behavior. The program must institute direct and explicit sessions that fulfill those objectives in order to provide the couple with alternative behaviors (marital skills) and insights.

The program consists of eight sessions, whose methods and contents are based on the previously stated rationale. A brief summary of each session follows:

**Session I. Goal Contracting.** The concepts of the program are presented to the couples in a general overview to provide them with clear conceptualization of the enrichment process. The use of explicit sorting of strengths and weaknesses is introduced and it is suggested that each couple assimilate lists of each other's strengths and weaknesses. Goals are then set using both strengths and weaknesses; three weaknesses and six strengths are chosen as the contractual basis for each
couple. Contractual form is evaluated by the group and suggestions are given concerning the communication skills demonstrated. Alternative communication skills are demonstrated by the group with direction from the leader. Homework is given to initiate a five-minute discussion period once a day using the communication skills.

**Session II. Four Communication Levels.** A short, didactic presentation is given to explain the four levels of communication. They are: (1) explicit verbal, (2) explicit non-verbal, (3) implicit verbal, and (4) implicit non-verbal. Couples are urged by direction of the leader to try the four levels of communication and reflect on the degree of meaningful, correct communication. Explicit verbal communication is described as the preferred form due to the minimum potential for distortion. Communication as related to sexuality is compared and couples are urged to become aware of distorted messages, particularly those related to sexuality. Self-defeating behaviors, particularly the non-verbal, are described, and couples are asked to discuss the implications. Homework assignments are to continue the explicit verbal communication through a designated time.

**Session III. Positive Reinforcement.** This session is designed to introduce a need for positive reinforcement between spouses and to show how negative reinforcement can limit marital fulfillment. Couples are asked
to set up explicit signals for those times when tension prevents positive reinforcement. Each couple is given an opportunity to share positive reinforcement with each other in front of the group. The group is asked to add positive traits about the couple. Then the couple is asked to tell how they responded to this positive reinforcement from each other and from the group.

Each couple's homework assignment is the sharing with each other of their goals for the future. Then they are to discuss each goal and decide which are actually attainable and which are not.

Session IV. Role and Value Clarification. Conflict is defined as the demand for time and/or attention based upon an unclear role and value hierarchy. Each person is asked to designate a ten-point hierarchical system of values and roles for himself. Then spouses compare lists to discover conflicts of values and/or roles. Each couple is requested to resolve the conflicts they have by using the communication skills learned earlier.

Session V. Spouse Role Expectations. The work in Session IV is used as a basis for clarification of spouse-role expectations. Each spouse compares his or her own list with the list of his or her spouse. Differences are resolved during dyad discussion and shared with the larger group. The Marital Responsibility Inventory is administered separately; then spouses compare results.
If there are conflicts, resolution is assisted through dyad and group discussion. The homework assignment is to implement the agreement and report back to the group on its success. Differences between spouses are stressed in a manner that resolution is possible, thus lessening consistent conflict areas. Practice of resolution is emphasized.

Session VI. Sexuality. In this session, a general overview of anatomy is presented to the group. If the spouses have resolved earlier issues concerning roles, they will feel free to determine new roles related to sexuality. Diagrams are shown, and the group is urged to discuss differences in basic perceptions of sexuality. Various forms of sexual expression are discussed with the group. Definitions are given to relieve the initial anxiety. Contraceptive devices and usefulness of planned parenthood are discussed with the couples in a direct, explicit manner. Smaller groups are designated to discuss the sources of sex education and myths associated with that education. Discussion of spontaneous sexual expression is the homework and couples are encouraged to attempt new forms of sexual expression.

Session VII. In-law Resolution. A brief description of the extended and nuclear family systems is given and then implications about need fulfillment are discussed. Couples are urged to discuss their family pattern and
ways to adjust to demands of change and family relationships. The perceptual approach to conflict resolution is explained during the first two sessions. Holiday conflict is a central theme designated for resolution. Each couple is asked to fill out an In-law Adjustment Scale, an open-ended questionnaire concerned with the in-laws. Spouses must come to an agreement on each item, thus deciding together the relationship they desire with the in-laws. The homework assignment is a designation of three specific goals that each couple wants to achieve in two years. If the previous seven sessions (this one included) have been successful, the couples should be able to work out their own specific goals.

**Session VIII. Marital Contracting.** This unit is concerned with the finalization of marital goals and with identifying mutual feelings. Couples are asked to communicate (using the four levels of Session II) as to how they perceive the experience of these eight sessions. Couples are asked to share these perceptions in the group with an emphasis upon explicit verbal goals. A Marriage Contract is given to each couple to finalize the decisions they have made together. Every area covered in the eight sessions is included on the contract. Positive reinforcement is then given to each couple by members of the group. Members are asked to practice giving
positive feedback to others in the group. A general
review of the MEG program is then conducted by the leader.

Marriage Enrichment Group
validation technique

Determining the quality and effectiveness of structured group experiences like the MEG program is difficult for the researcher. The techniques employed to evaluate the program in this study include: (1) written evaluations by participants, (2) interview evaluations by participants, and (3) evaluation of skills before and after participation.

In 1968, the first few items were developed and written for use with families of juvenile delinquents in Chicago. Original experience with the items developed a concern for pragmatic implementation of a group program rather than individual family counseling. As the program was developed, marital roles rather than family roles were emphasized.

From 1970 until 1972, the items were used as tools for marriage counseling conducted in a church parish office in Michigan. The need for group participation prompted the development of the group procedure. It was formally started in 1972-1973 with eight groups of ten couples each. The evaluation form (Appendix A) was administered and properly revised after each program.
In addition, Dr. Kenneth Bullmer, counselor educator at Western Michigan University, assisted in evaluating the program during the fall of 1972. Dr. William Martinson, counselor educator at Western Michigan University, also served as an evaluator of the program and suggested readings that would assist in the revisions.

After a program conducted during the spring of 1973, the group was asked to evaluate the model. Results of the evaluation showed that the model used had appealed to the needs of the group members. These results provided valuable precedents in implementing the case study research conducted during September and October of 1973. The only revision was the development of Session VI, arising from a concern of Dr. Kenneth Bullmer that the session be extended.

Evaluation and revision is a constant and demanding educational process, and the results of the present study are intended to advance future revisions of the program.

POPULATION AND SAMPLE

The sample was drawn from a population of thirty referred couples who were parents formerly in psychiatric treatment at the Kalamazoo Child Guidance Clinic, Kalamazoo, Michigan. Children of these couples had received treatment for a range of adjustment problems, including
hyperactivity, neurosis, and school phobia. Some children had been receiving medication, individual treatment, and/or family treatment by the staff. Parent couples had received guidance in the form of child management techniques, family treatment, and/or supportive counseling related to the child's problem.

Four couples (eight persons) were selected from the thirty couples according to positive responses gained from the following questions: (1) Are the children presently having a reasonable emotional readjustment to home and/or school? (2) Are the parents willing to commit themselves to eight sessions over an eight-week time period? (3) Are the parents relating to each other so that their interpersonal relationship would be functional and workable within the group? (4) Are the parents capable of reading a manual and working together on assignments of the group experience? (5) Are the parents relatively free from antisocial behavior?

Ages of individuals ranged from thirty-two years to fifty-two years. One couple included a professional man with a master's degree and a wife with a college degree. Three other persons had one to three years of college and the remaining three had high school education. All four couples were Caucasian and were in the $10,000 to $20,000 salary range. All four couples had lived in the greater Kalamazoo area for the last two years. Their
family size ranged from one to five children. All four
couples owned or were purchasing their own homes and
participated (to various degrees) in religious activi-
ties in the city.

Sample couples were interviewed separately for two
hours prior to final selection in order to confirm the
results of the clinic files and observations of their
previous therapist. At the conclusion of the interview,
an invitation was extended for inclusion in the Marriage
Enrichment Group (MEG). A mutually acceptable time for
group meetings was set; namely, Tuesday evenings from
seven to nine p.m.

INSTRUMENTS OF MEASUREMENT

Leary Interpersonal Check List

Leary (1957) designed an interpersonal check list
that uses a self-report system. This tool has what Leary
describes as octant categories with a two-factor (Domi-
nance vs. Submission and Love vs. Hate) circumplex with
sixteen defined segments. Qualitative variations in
behavior are reflected in terms of the octant location
within the circle itself. The degree of intensity of
behavior is then represented by the distance from the
center of the circle. Each octant is titled with dual
labels, reducing the circle graph to eight categories.
The first label indicates a mild, socially acceptable
behavior, while the second label represents the extreme form, clinically evaluated as pathological (p. 233).

These octants include: (1) Managerial-Autocratic (strong, assertive—dictatorship, dogmatic behavior); (2) Competitive-Narcissistic (independent, proud—exploitive, boastful); (3) Aggressive-Sadistic (blunt, firm—cruel, sadistic); (4) Rebellious-Distrustful (cynical, wary—marked suspicion and bitterness); (5) Self-effacing-Masochistic (anxiousness, modesty—guilty submission, self-condemnation); (6) Docile-Dependent (invitation for support—clinging dependency); (7) Cooperative-Overconventional (positive submission, friendly—conventionality, willingness to compromise); (8) Responsible-Hypernormal (humanitarian—self-sacrifice).

Each person in the group will be given the Leary Interpersonal Check List with the first four columns titled as follows: (1) self (the person taking the test); (2) ideal-self (what the person would like to be); (3) spouse (the husband or wife with whom they are now living); (4) ideal-spouse (the behavior the person taking the test would like to see in his/her spouse). Test-takers are asked to circle the adjective that best describes the person in columns one to four, as he or she presently sees that person. The remaining four columns are not used during the study.
Although the intent of the MEG evaluation is not specifically diagnostic, Leary provides for converting the scales to the Minnesota Multiphasic Personality Inventory and Thematic Appreception Test. The limits on the research for this study exclude the conversion tables, but future research can certainly make use of such scores for additional diagnosis. Specifically, the interest of this study is in the moderation of the scores from the pathological ranges of interpersonal relations (with self and spouse) to more normal levels of relationship.

Leary's full-scale diagnosis is not used except for the scoring on the pictoral graph and subjective comparison of the differences between pre- and post-responses. Concern is centered on the general changed patterns rather than specific diagnostic categories (Leary, 1954, 1955, 1957). Bentler (1965, pp. 266-268) has suggested that the lack of standardization techniques renders the research tool only practical for conscious measurement of descriptive material. The ICL was published in 1955 under agreement not to copyright in order that duplication of the test would further the use in research.

Wittrup Marriage Inventory

Another measure developed in this study was the Wittrup Marriage Inventory. The Inventory is a seven-point
semantic differential scale with one being positive attainment and seven being negative assessment of the skills.

A total of fifty questions were chosen from six general categories including: (1) sexuality response, (2) communication development, (3) emotional fulfillment, (4) role and value definition, (5) goal definition, and (6) interpersonal resolvement outside the couple.

Analysis was conducted by comparing the scores on a pretest and posttest basis with concern only to the responses that were tending toward either negative or positive responses. For example, the concern would be whether the questions on emotional fulfillment moved from the original negative tendency to a positive tendency.

Pre- and Post-Interviews

Intensive interviews were conducted before the first group meeting. Termination interviews were given seven days after the group meetings had concluded. Interview questions, based on the leader's impression and results of the tests, were designed to assess the degree of change in the marriage relationship. In no way can the conclusions be assumed to be free of bias in the interview or interview report. With that
limitation, case studies are used in evaluation of effectiveness in changed marital relationships.

TREATMENT CONDITIONS

Group meetings were held in the psychiatric clinic on Tuesday evenings for eight consecutive weeks. Each meeting was two hours long.

The Leary Interpersonal Check List and the Wittrup Marriage Inventory were administered at the first meeting.

Control over change in the marriage relationship was difficult, due to the influences of vocational and avocational demands. Members participated in only one unit of the MEG program each time in order to control progress of the total group. Homework assignments were given verbally at the conclusion of each session.

The Marriage Enrichment Program was completed in the following schedule:

first session, 1 hour, 45 minutes
second session, 1 hour, 30 minutes
third session, 2 hours, 10 minutes
fourth session, 1 hour, 35 minutes
fifth session, 1 hour, 45 minutes
sixth session, 2 hours, 5 minutes
seventh session, 1 hour, 30 minutes
eighth session, 3 hours, 5 minutes
Couples unable to complete an entire session's exercises were permitted to continue the exercises at home. Only two couples made use of this option during the treatment.

Couples were not told at the outset that they were part of an experimental program. This was an attempt to avoid any distortion that knowledge might cause. At the conclusion of the sessions, the couples were told the additional purpose of the program, the results of the criteria instruments, and general information as to their performance in the group.

Couples were encouraged to complete the instruments of measurement as sincerely as possible. They were told that the results would assist in future revisions of the program and in assessing the growth of their marital relationship. Couples were told that the accuracy of the measurements would give them a clear picture of their marriage.

RESEARCH HYPOTHESES

The following hypotheses, formulated from the basic question of this study, are stated in the null form.

Hypothesis 1: There will be no difference between the scores of the pretest and posttest as measured by the Wittrup Marriage Inventory and Leary Interpersonal Check List.
Hypothesis 2: There will be no difference between the interview assessments conducted before the group meetings and those at the conclusion of the group.

Hypothesis 3: There will be no change in the actual marital relationship at the conclusion of the group sessions as reported by the couples.

RESEARCH ANALYSIS

Kerlinger (1972) and MacKinnon and Michels (1971) suggest that the interview is a reliable means of assessing change on an individual basis, particularly if done in a clinical setting. After considering other empirical studies, the interview was determined as the preferable means to attain meaningful information needed to assess the marital relationship. In addition, the Leary Interpersonal Check List and Wittrup Marriage Inventory were administered as auxiliary instruments to compare results of the group sessions. Traditional psychiatric case studies were then developed.

Hypothesis 1 will be tested by using the Wittrup Marriage Inventory to assess the attainment of the program goals. Visual inspection of the data will be used in this assessment.

Hypothesis 2 will be assessed by the compared results of interviews conducted before the sessions and
after the sessions were complete. Self-reporting will be relied upon to attain the degree of change or non-change in marital relationship.

Hypothesis 3 will be assessed by the interview conducted seven days after conclusion of the group meetings.
CHAPTER III

RESULTS

The purpose of this study was to investigate whether couples in marriage could be assisted in marriage fulfillment by learning skills, gathering cognitive concepts, and developing new role relationships. Case studies were developed for the intended purpose of testing the hypotheses which were developed from the general question, and the results are presented in this chapter.

CASE STUDIES AND THEIR ANALYSES

The four couples in the study were interviewed before and after the administration of the treatment concerning the changes or lack of change in each couple. Standard reporting will include a summary of the initial interviews, the content of the group involvement, and the summary of the terminal interviews.

Case Study One

Summary of initial interview

Mr. and Mrs. T. were referred to the Marriage Enrichment Group (MEG) due to a long history of family disruptions. Both Mr. and Mrs. T. were college graduates, upper-middle-class Caucasians from established homes.
The presenting complaint was a sense of futility in the marriage and some suggestion of a divorce. Their children were twin male teenagers, now in their senior year at the local high school. Mr. and Mrs. T.'s sexual relationship had deteriorated in intercourse frequency to less than once every two months by mutual agreement. Their communication consisted of business-like discussions with no expressed desire for intimate communication. Recreation and finances were constant areas of friction in that Mr. T. wanted more leisure time while Mrs. T. was more concerned about the eventual total cost of leisure time activities.

Both Mr. and Mrs. T. complained of fatigue, headaches, insomnia, and stomach upsets that were both frequent and intense. Recent physical examination had proved negative, and therefore the physician recommended they seek individual therapy. They requested conjoint marital therapy for themselves due to their deepened concern about their marriage. At this point, the couple was referred to the MEG.

Their marriage history consisted of financial and academic successes during the first ten years of marriage for Mr. T. and deep concern for the parenting of twin boys for Mrs. T. Initial financial success for Mr. T. necessitated less and less time with his wife and family. Resentment and anger deepened, and the first signs of
the marital dysfunction were a series of arguments and trial separation after seven additional years of emotional and physical distance for the couple. They came to the attention of the clinic after a school referral. Their son was seen by the teachers as having a "poor attitude and hostile behavior with teachers." During the initial intake procedure, the dysfunction was noted and a referral was made.

**Group content**

Early in the sessions, Mr. and Mrs. T. essentially used the MEG as an intellectual opportunity to learn about marriage. Little emotional impact was noted during the first four sessions, but they did participate in the group sessions. Their communication was altered slightly under group support to some sharing of emotional material during sessions four and five. Mr. T. eventually expressed great impatience with the structured nature of the program and stated he would prefer spontaneous expressions. The program was then explained as a structured one, rather than one which permitted those spontaneous reactions.

Session six started with Mr. and Mrs. T. showing greater enthusiasm and involvement in the group. When the husbands and wives separated for their session, both Mr. and Mrs. T. examined the sexuality issue on a
deeply personal level. They used the remaining two sessions to enhance their relationship with great effort to overcome the earlier resistance to structured expectations but still retained hesitant acceptance of structured marital expectations.

Summary of terminal interview

Mr. and Mrs. T. reported that some of their marital difficulties had been resolved due to the communication skills and group support. They reported that sessions six, seven, and eight had been most helpful once Mr. T. had let down his fears of the structured expectations. Specifically, the opportunity to share the decision-making process in an explicit verbal experience prompted the conflict resolution and deeper self-understanding.

Mr. T. reported that due to the conflict resolution, he had found some increased energy for his work and since the sixth session no longer complained of fatigue, headaches, insomnia, or stomach pain. Mrs. T. reported that all physical complaints besides the stomach pain had now been eliminated. A recent physical traced the pain to a possible liver infection.

They both reported that both twins spontaneously noted the changed behavior in their parents, and said that the twins had improved in their behavior in school. Greater relaxation in the family structure was noted due
to resolution of the financial-leisure conflict. Since the conclusion of the group, a family conference had been instituted to resolve complaints on a weekly basis.

Each had found each other more sexually responsive and had been having sexual intercourse three times a week. Intimate discussion prior to sexual expression enhanced the relationship until each reported an increased sexual drive. They found opportunities for other sexual expression (petting, fondling, embracing) more frequent and enjoyable than before.

Mr. and Mrs. T. recommended the MEG to their friends as a result of their positive response. During recent social contacts, friends had noticed the somewhat changed relationship, and Mr. and Mrs. T. shared the group objectives.

The only continuing conflict was the setting of specific long-range goals that still were difficult. Both Mr. and Mrs. T. reported some additional conflict involving discipline with the children, but answers could now be found and implemented within the family conference.

Overall, they reported satisfaction with the program and requested five additional conjoint treatments to work out the specific goals desired and contingency programs.
Test results summary

Leary Interpersonal Check List scores indicate no conclusive changes in posttest administration. Additional numbers of responses for both Mr. and Mrs. T. indicate only greater numbers of descriptions.

Wittrup Marriage Inventory post-session scores indicate no gross changes, tending to repeat the previous scores. Again, no conclusion can be drawn.

Case Study Two

Summary of initial interview

Mr. and Mrs. S. were referred to the Marriage Enrichment Group (MEG) because of their concern about the apparent lack of intimacy in the marriage. The couple was middle-class, managerial Caucasians, both college educated and financially stable. Mr. S. complained of empty, guilty, anxious, and depressed feelings, especially when at home alone. Mrs. S. also expressed concern about her equally empty feeling along with concentration difficulties. Their communication consisted of hostile arguments followed by total withdrawal from each other lasting a week or more. Physical symptoms included headaches, weight gain, and insomnia for both Mr. and Mrs. S.

Their family consisted of three girls and two boys attending grades one to nine. The family had little time
together, which had precipitated some concern by the mother as to the "sterile" family life. For a number of months, Mr. S. had spent long hours at the insurance agency, which required some evening house calls and little time with the children.

Their sexual relationship since the birth of the last child was infrequent, both reporting a three-month abstinence without any direct mutual agreement. Intimate feelings were denied to the degree that the touch of the spouse was avoided by both. Mrs. S. reported that she would occasionally cry herself to sleep after rejection of attention (she had wanted to sit and talk) by a husband who preferred television.

Their marital history consisted of fifteen years of economic growth and emotional decline. With every advancement at the agency and with the birth of each child, less and less time was set aside for the dyad development. When Mr. S. would return home, he was exhausted and in no mood for either a family or a married life. Mrs. S. had started to gain greater amounts of weight until she was now about eighty pounds heavier, something Mrs. S. rejected verbally.

Their contact with the clinic started with a referral from the physician for hyperactivity with their fourth child. Diagnostics revealed no physical basis, and subsequently, therapy revealed a basic lack of
security felt by the child causing the hyperactive symptoms. Basic child management techniques were rejected in preference for a referral to the MEG. Their therapist stated that the marital relationship needed assistance before child management techniques were utilized.

**Group content**

Mr. and Mrs. S. were the most verbal individuals throughout the sessions. The first session provided an outburst of anger over the frustration of their married life. Empathy from the group assisted the couple to look positively at themselves, which led to embracing and smiles before the first session was complete. The next four sessions revealed a greater desire to initiate greater intimate relationships together, and they had worked at the exercises. Mrs. S. showed the change by means of her appearance. She began losing weight and now dressed in modern pant suits. Mr. S. revealed that he was spending more time at home and sensing a need to become more intimate with his wife.

Session seven began with a short revelation by Mr. S. that by means of the role and value exercise he had come to accept his role in the family and marriage as primary roles. Mrs. S. concurred with some anecdotes about the newfound relationship accompanying the change. Session eight was emotional, due to a decision for a
week's vacation for themselves in the next month without the children.

**Summary of terminal interview**

Mr. and Mrs. S. reported that they had lost fifteen and twelve pounds, respectively, since the first session. They attributed the change to a reduction of marital tension and resolution of basic conflicts. The opportunity to explore their marriage in a structured, group-oriented experience was designated as the cause of the change.

Mr. S. reported no additional problems with insomnia or headaches since the second session, and Mr. S. indicated greater concentration ability at work, thus lessening the need for his extended work hours. Mrs. S. also reported no further insomnia or headaches and also reported an end to back spasms that had plagued her for approximately three years. A recent physical had completed the self-description of change with a physician's positive evaluation of their physical condition.

Their sexual relationship had developed since the introduction of birth control and more gentle lovemaking. Mrs. S. reported sexual drive but with some remaining inhibitions. Mr. S. reported that they were now having sexual intercourse on the average twice a week with the wife now initiating the physical contact.
Communication problems were reduced by means of their system of regular breakfast conversations. No children were present, and an hour of each day was preserved for conversation. Other available time was used for developing goals and leisure for their marriage. They reported numerous long conversations lasting three hours or more.

Mr. and Mrs. S. confided that their child (referred for hyperactivity) was no longer exhibiting the poor behavior, and his grades had improved from C's to B's. During a recent Sunday dinner, the child had reported "you guys [parents] are so neat—you talk instead of yell." The other children had reported similar feelings about the relationship, specifically the new family life.

Mrs. S. still reported occasional depression, but less frequent than before (once a month, lasting an hour). She had learned to confide newly understood feelings to her husband with less fear of rejection than before. The lessened fear assisted Mrs. S. in resolution of her "home-bound" feelings.

Recently, they attended a party given by some neighbor friends. During dinner the conversation was about marriage, and Mr. and Mrs. S. revealed their attendance in the MEG. They recommended to the couples, a positive opportunity to enhance their marriages. This was
something neither Mr. or Mrs. S. would have revealed before the MEG sessions.

Their overall reaction to the group was positive, especially to sessions one through five, seven and eight. Their problem with session six seemed to be the undeveloped presentation of sexuality and lack of input about sexual dysfunction. Because of their concern, additional conjoint sessions were scheduled to work specifically on the sexual dysfunction.

Test results summary

The Leary Interpersonal Check List scores indicate no major changes in descriptive perception on retesting. No conclusion can be drawn from the lack of change.

The Wittrup Marriage Inventory scores indicate more positive reactions to marital roles for both Mr. and Mrs. S. Results can be concluded as showing moderate positive change; therefore, a relationship is indicated between the MEG sessions and marital role perception.

Case Study Three

Summary of initial interview

Mr. and Mrs. G. were referred to the MEG after the Kalamazoo Child Guidance Clinic had treated their child for a school learning problem and perceptual problems. This couple could be described as middle-class, high
school educated, and Caucasian. Mr. G. held a foreman's position in a small local factory. Mr. and Mrs. G. communicated initially in hostile tones with some characteristics typically found in a marriage lacking in intimacy. Mrs. G. described their home as a "hotel" where Mr. G. "ate and slept and little else."

Mr. G. complained of increasing fatigue, headaches, and loss of concentration on the job. An accident at work recently was attributed to his negligence in job performance. Mrs. G. reported insomnia, headaches, and depression that would last days at a time. Both Mr. and Mrs. G. were finding decision-making more and more difficult, thus creating greater home tension.

Their sexual relationship was described as lacking in any spontaneity and intimate expression. Mr. G. complained concerning his wife's frigidity and Mrs. G. complained about her husband's premature ejaculation. They requested an opportunity to analyze their marriage and potentially discover new positive behaviors.

Their marriage history consisted of a stormy courtship heightened by a conflict over their sexual relationship. Mrs. G. had never forgiven Mr. G. for insisting on frequent sexual intercourse before marriage, something usually denied by Mrs. G.'s religious beliefs. The first two years of their marriage were relatively stable, with only occasional verbal arguments. Their child was
conceived one night after a failure of the foam contraceptive. The result was the entire pregnancy was toned with depression and two separations, after which Mrs. G. went to stay with her parents for a month to six weeks.

According to their report, psychiatric treatment during the last eight years had been unsuccessful. Their one success was financially, as they had been able to finance and furnish a small house. Financial success could not overcome the acute awareness of an increasingly poor marital relationship. Both Mr. and Mrs. G. felt that their marriage, although difficult, was worth salvaging and enriching.

**Group content**

Early in the first session, Mrs. G. had referred to her husband as the "big cheese" who doesn't care. The group insisted on a better definition of the term "big cheese." Mrs. G. confided that she doesn't really give Mr. G. an opportunity for marital closeness. Contractual agreements and goals took more time for Mr. and Mrs. G. than any other couple, but smiles and some touching were noted during the dyad exercises.

Sessions two through five assisted Mr. and Mrs. G. with their communication problems, specifically the tendency toward assumptions. Mr. G.'s rather hasty communication was slightly modified and Mrs. G.'s
previous withdrawal behavior was also modified. Session six created the greatest anxiety, when sex was discussed, but the open discussion of contraception later led to a rational decision to try the contraceptive pill, normally denied by her religious teachings.

Mrs. G. came to session seven with a new set of clothes and the first hairdo change in four years. Mr. G. correspondingly showed greater interest by more demonstrated physical contact (hand-holding and pats) than previously shown. The group spontaneously told Mr. and Mrs. G. that their change was noticed and envied. This response reinforced that behavior. Session eight produced more smiles and some laughter from a previously somber Mrs. G., something Mr. G. enjoyed.

**Summary of terminal interview**

Mr. and Mrs. G. summarized their experience as "a growing experience." Mr. G. was aware of the changed relationship, particularly the positive attitude of his wife with some relaxation in her sexual responsiveness to him. Also, he had noticed only occasional headaches with no fatigue or concentration problems on the job. His employer had recently complimented him on work performance during a meeting two weeks before.

Mrs. G. reported that her insomnia was reduced to only occasional difficulty in falling asleep now and few
headaches. Depression was less frequent, developing only an hour or so once a week. She revealed that four months earlier she had considered suicide during a deep period of depression. She felt somewhat more responsive to her husband sexually, but requested additional assistance in learning how to be even more responsive to him.

Their child reported to his teacher that mom and dad were more relaxed. He blurted out in class that they were now finally going to a football game this year as a family. Both Mr. and Mrs. G. noticed the relaxation generally around the home. Greater attention was shown by each to family activities, particularly recreation and leisure-time experiences.

Mrs. G. reported that the contraceptive pill relieved some anxiety about getting pregnant that had limited her enjoyment of sex. She reported that the premature ejaculation problem was still continuing but with less frequency and less emotional upset. Her frigidity still continued, but the feeling of her husband's physical closeness was no longer frightening.

Overall, they felt the experience assured their marriage was going to be functional and potentially happy. All sessions, with the exception of session six, were evaluated as helpful. Session six was described as needing more time with dysfunctional problems and
description of sexual acts. They reported during the terminal interview that they would recommend the MEG experience to their friends. Both Mr. and Mrs. G. felt the positive nature of the group relieved great initial anxiety. Specific goals and exercises allowed them as a couple to develop the marriage according to their own needs.

Test results summary

The Leary Interpersonal Check List shows few changes in posttest results for Mr. and Mrs. G. No conclusion can be drawn from the results.

The Wittrup Marriage Inventory indicates positive attitude toward marital roles after posttest for Mr. and Mrs. G. We can conclude that the WMI did demonstrate sufficient changed perception to conclude the positive change. Therefore, the couple is now perceiving their marriage as having more positive than negative characteristics.

Case Study Four

Summary of initial interview

Mr. and Mrs. A. were referred to the MEG after their child was treated for a reading problem in school. Both Mr. and Mrs. A. can be described as a lower-class, Caucasian working couple. They presented a long history
of marital problems related to the constant in-law interference. Since their marriage ten years ago, both sets of in-laws had interfered in their home life, directing the four grandchildren, giving financial advice, and competing for attention during the holidays.

Constant pressure from the in-laws had inhibited rational marital communication. Mr. and Mrs. A. reported that the final result of in-law interference was irrational assumptions about the other's opinions. The end result was hurt feelings and deep resentment. Arguments precipitated and followed every holiday or weekend with the in-laws. These had caused a variety of physical complaints. Both Mr. and Mrs. A. suffered from chronic depression and fatigue prior to and immediately following contacts with the in-laws. This depression and fatigue also contributed to poor concentration at work and insomnia at night. Their desire to find resolution of this problem was the presenting concern.

They had met while at a high school and happily courted during the junior and senior years. After they worked at a local factory, they were engaged and married despite his mother's protests. Mr. A.'s father had died two years earlier and as the only son, he was expected to remain at home. Initially they enjoyed the family reunions and parties, but after moving to the present city, their visits home became less and less frequent.
Their only obligation now centered around holidays and one weekend a month. Relatives came constantly to their home without invitation, causing disturbances and quarrels.

After an upsetting weekend at home, Mr. and Mrs. A. decided that a solution needed to be sought immediately. Their marital relationship was fine except for the meddling in-laws and the accompanying stress. Religious expression still was a very important emotional outlet through their fundamentalist sect church. Singing, praying, and family life were stressed as Christian virtues, particularly for the benefit of their child.

Group content

Both Mr. and Mrs. A. expressed themselves concerning the constant frustrations and anger over the interference with their family life. Group support assisted them in assessing their feelings as not "sinful" but a normal part of living, which they accepted. During the third session, Mr. A shared that he decided to terminate an extra job that added some financial support but increased the home tension. Mrs. A. had revealed that without the extra money it was possible to manage, and she would prefer the additional leisure time with Mr. A.
The In-law Adjustment scale in session six assisted them most. Both Mr. and Mrs. A. approached the task with vigor and energy, and decried the degree of ambiguity that had existed in their in-law relationship previously. After discussion, Mr. and Mrs. A. reported concise decision involving the expected holiday plans.

The final session was approached by Mr. and Mrs. A. with expressions of success and newfound happiness. Their contagious vigor was deeply appreciated by the group.

Summary of terminal interview

Mr. and Mrs. A. were far more spontaneous and positive in their relationship than before. Last week, they had gone for a hike and picnic alone as a couple and engaged in setting up an agreement to never let the in-laws come between them again. Mrs. A. reported feelings of accomplishment and a desire to discover new relationships outside the in-law circle.

The In-law Adjustment Scale was implemented by deciding to stay at a motel when visiting relatives rather than crowding into their homes. Also, instead of negotiating with the parents, they had called the parents and informed them that during Thanksgiving they would be at the paternal grandparents and Christmas at the maternal grandparents. The only change was that
Mr. and Mrs. A. would stay at a nearby motel. Despite mild protests, their wishes were accepted.

Both Mr. and Mrs. A. reported reduction in the physical symptoms surrounding visits home. Only mild anxiety had accompanied the first visit home since the decision was made. Fatigue no longer accompanied decisions to visit or while actually visiting the in-laws.

Mr. A. reported that their child showed no real change in behavior other than a reduction in anxiety about in-law visits. The child's reading problem was treated at the Kalamazoo Child Guidance Clinic.

Both Mr. and Mrs. A. believe the MEG assisted them in resolving their in-law problem, thereby making their marriage more relaxed. Mrs. A. reported a feeling of closeness with the group members and expressed deep appreciation for the support received. The couple would recommend the experience. Their greatest fear was of "sensitivity groups" or unstructured group experience. Their fear was due to a close friend of Mrs. A. who had participated in an unstructured group and had to be hospitalized. The assurance of structure permitted their participation.

**Test results summary**

Leary Interpersonal Check List posttest compared to pretest demonstrates no conclusive changes in scores.
for both Mr. and Mrs. A. We cannot assume any conclusion based upon these results.

Wittrup Marriage Inventory results show on posttest a continuation of positive perception with no change for Mrs. A. and increased positive marriage perception for Mr. A. We can only assume that the positive nature of the perception was continued with treatment.

DISCUSSION OF RESULTS

The case studies illustrate that the Marriage Enrichment Group Program was effective in assisting couples in the resolvement and development of a potential relationship. Changes in the marital relationship were attributed by the group members as due to the group support and structured exercises of the MEG program. Only Mr. T. in case one illustrated difficulty in a structured group experience.

Responses to Leary's Interpersonal Check List showed slight change when administered before and after the MEG treatment. Such test results would suggest either slight change in the couple's interpersonal relationship or that the instrument was not sensitive to the subtle changes in that relationship.

Responses to the Wittrup Marriage Inventory demonstrated moderate changes in the marital relationship. When compared to the ICL results, a conclusion can be
drawn that the specific questions of the WMI tend to elicit subtle changes in the marital relationship.

Case one illustrates no change, probably due to the lack of cooperation of Mr. T. Strong conclusions can be drawn concerning the need for mutual cooperation for both husband and wife. Without such cooperation, the program was resisted and there was no change in the marriage relationship.

Perhaps cooperation was a factor in the outcome to a greater degree than imagined. A lack of cooperation of one or both spouses makes the implementation of the MEG program impossible; the program rather than another dispute became the resisted relationship. Therefore, cooperation must be elicited before the MEG program is used by couples.

Generalizations cannot be made beyond the sample group used for the study. Four case studies do not contribute sufficient empirical information to generalize to the general population. Numerous variables and relationship patterns are so involved to render any conclusion as speculation. An ideal study would include the entire Kalamazoo Child Guidance Clinic parent population, which was not practical.

Similar married couples can be given a similar MEG program with an assumption of gaining similar results. Only through additional administrations can future
research develop needed empirical information. Until more data are collected, generalizations will remain tentative.

Each couple indicated a change in perception of the spouse during the eight sessions. Significant others (parents, friends, children) observed the changed relationship and gave positive support for those changes. A combination of significant others and spouse gave positive reactions to new roles and behaviors. Such reactions were important in the trial attempts at such roles and behavior.

Case study results are not conclusive to the degree of a direct cause-effect relationship. Case studies tend to elicit biased results from participants but develop understanding of the changes. A conclusion can be drawn that the MEG program assisted the relationship change. Since the subject matter was developed on a trial and evaluation basis, further research is suggested on the program outcomes themselves.

IMPLICATIONS

Case study outcomes suggest several possibilities for future research. Neither the Leary Interpersonal Check List nor the Wittrup Marriage Inventory is adequate for future evaluation of the MEG program. Lack of precise statistical measurement handicaps the refinement
and development of the program. Case studies do lend themselves for in-depth understanding of married couples, but the time and expense does not make a large sample possible for needed evaluation of the program.

Additional didactic discussion of sexual dysfunction was requested during the termination interviews. Future research should assist both in the development of such discussion and an assessment tool to measure the degree and type of sexual dysfunction. Until the MEG program would include such input and measurement, the sexuality unit would not be necessarily helpful to the married couples.

Application of the MEG program needs to be broadened to include a variety of economic, social, and educational settings. Programs tend to project social, cultural, and economic values, and the MEG program, because of previous application, is middle-class in orientation. Either application limits need to be imposed or a more culturally free program needs to be developed.

Case studies presented were Caucasian, middle-class persons. Whether the MEG program can be utilized in another setting needs to be evaluated. Such studies would prove valuable to clinics, schools, and institutions interested in the formulation of similar programs.
CHAPTER IV

SUMMARY

Marital counseling literature over the last twenty years has served as the most compelling evidence of the continued evolution of marriage counseling as a separate counseling concern. As a new discipline, marriage counseling requires new innovative programs that not only diagnose, but educate the couple in terms of alternative roles and relationships.

Marriage counseling has developed from an unrelated combination of clinical service needs rather than comprehensive empirical studies. Perhaps the limited results of this study can be attributed to the lack of research controls for the foundation for the new discipline. Use of eclectic counseling techniques tends to minimize the essential need to study these assumed results. Precise, laboratory-tested research on similar MEG programs is not available either for duplication or comparison.

One assumption can be that marriage enrichment programs do not assist in the marital relationships. Such an assumption would be the central issue in future research that must be conducted. Case studies cited underwrite the need for this or a similar program.
The objective for the Marriage Enrichment Group program was the development of a preventative counseling program intended for the general improvement of the marriage relationship.

A review of marriage counseling or marriage-related counseling provided a basic format for the development of the MEG program. Case study procedures tested the effectiveness of the program in a clinical setting with four married couples at the Kalamazoo Child Guidance Clinic, Kalamazoo, Michigan.

A sample of four married couples were selected from a population of thirty referred couples according to selection questions. All couples were parents of children previously seen at the clinic. Four couples were included in the case study approach.

During the eight-week treatment period, the MEG program was presented one unit at a time on a once a week basis. Extensive notes were kept on each couple for eventual clinical evaluation. Each couple received an additional two-hour post-treatment interview for the completion of the case studies and feedback sessions on the MEG program. Methods used for the program consisted of didactic presentations, group exercises, and group counseling.

Subjects of the sample group were given pretreatment and posttreatment tests on the concepts and ideas
presented in the MEG program. Both the Leary Interpersonal Check List and a special instrument, the Wittrup Marriage Inventory, were administered. The Interpersonal Check List was utilized to determine its usefulness in future research, while the Wittrup Marriage Inventory was used to assess changes in attitudes toward marriage.

Case studies on each couple were developed during the entire research period. Exhaustive notes were kept on the behavior and conversation of the group members. Only pertinent material was selected for the case studies which were presented. These case studies were used to evaluate the effectiveness of the MEG program.

Results of the case studies as related to the objective can be summarized as follows:

1. There was no measurable change in the marriage relationships that could be assessed by the Leary Interpersonal Check List. Subjective evaluation of the results showed no results that could be measured as pertinent. The Wittrup Marriage Inventory showed moderate change in relationships in three of four couples.

2. Case studies revealed significant resolution of relationship problems that had existed prior to the treatment. Only one case revealed no definable resolution.

3. Information received during posttreatment interviews found that all four couples described the marriage
relationship as improved. Most change was found in cases two, three, and four. Only case one did indicate slight relationship change.

Case study outcomes were interpreted as indicating: (1) The Marriage Enrichment Program was effective in changing the marriage relationship; (2) The Marriage Enrichment Program may be an alternative form of marriage counseling; and (3) The amount of marriage relationship change is related to the degree of resistance exhibited by the individuals in the sample group.

The MEG program is evaluated as a potential preventative counseling technique when carefully administered to married couples.

Married couples need assistance in learning self-sufficient roles that are mutually satisfying. Counselors must utilize the counseling techniques in preventing dysfunction rather than rehabilitation of dysfunctional marriages. Not only does the marriage prosper but the children learn healthy roles from healthy parents. Only by the enhancement of the pillars of the family, the married couple, can the mental health of the family improve.
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APPENDICES

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APPENDIX A

PILOT EVALUATION FORM
GROUP EVALUATION

1. Group Goals: The goals of a group experience in marriage enrichment should be to discover marriage skills, enhance communication patterns, and look creatively at potential problems in marriage.

Has this marriage enrichment experience been valuable to your marriage?

   Valuable 1 2 3 4 5 6 Worthless

2. Sources of Information: You have been in contact with sources of information including books, movies, directed discussions, laboratory experience, and self-evaluation charts.

How helpful are they in helping you achieve the goals of this group experience?

   Useful 1 2 3 4 5 6 Useless

3. Course Content: How well did you like the content of the course?

   Like 1 2 3 4 5 6 Dislike

4. Staff Competence: The group leaders of the course bring to the experience a relative level of competence.

How well did the staff seem to have mastered the information and skills the course is attempting to teach?

   Well 1 2 3 4 5 6 Poorly

5. Staff Personality: Group leaders should have a warm personality in order to carry out the goals of this experience.

Are the group leaders pleasant to interact with?

   Pleasant 1 2 3 4 5 6 Unpleasant
6. **Staff Helpfulness:** The goal of this course is to provide you with skills for future and present experiences in marriage.

Did the staff provide you with skills related to your present and future experience?

Provided 1 2 3 4 5 6 Not Provided

7. **Staff Responsiveness:** The staff should be flexible enough to incorporate suggestions and/or concerns of the participants.

How responsive was the staff in incorporating your concerns and/or suggestions made known to them?

Responsive 1 2 3 4 5 6 Unresponsive

8. **Organization:** The goal of this experience is to be sufficiently organized to cover the area desired in the goals and to provide sufficient experiences.

How well organized is this course?

Organized 1 2 3 4 5 6 Unorganized

9. **Promotion of Thinking:** One of the goals of the experience is to promote thinking related to your goals in marriage and skills necessary to achieve those goals.

Did this course promote your thinking about your marriage?

Promoted thinking 1 2 3 4 5 6 Stifled Thinking

10. **Interest:** One of the goals of this experience is to promote interest in future marriage enrichment experience.

Has this experience increased or decreased your interest in involving yourself in future marriage enrichment experiences?

Increased 1 2 3 4 5 6 Decreased
11. Skills: One of the goals of this experience is to promote a positive feeling toward marriage counseling.

Do you feel more positive about the healthy aspects of marriage counseling?

More Positive 1 2 3 4 5 6 Less Positive

12. Promotion: One of the goals is to promote marriage enrichment as a positive, preventative, growth experience.

Would you recommend this experience to a friend?

Recommend 1 2 3 4 5 6 Not Recommend

ADDITIONAL COMMENTS:
APPENDIX B

MEMBER'S MANUAL FOR THE MARRIAGE ENRICHMENT GROUP PROGRAM
This program intends as its main purpose to provide experiences, skills, and insights essential to a fulfilling marriage. Many of the ideas in this program are the result of many groups that have given input and suggestions.

The inspiration for a marriage enrichment program came one late evening in an office at the Audy Home for Children in Chicago. A phone conversation had just ended with a distressed father of a boy, held in the home, who had asked, "If there was only something my wife and I could have done to make our family stronger and warmer." Unable to give him anything but support and sympathy, a series of probing questions came to mind. First, by the time the court becomes involved, or even the schools, much of the emotional damage has already taken place. Second, present forms of counseling deal essentially with the heavy and difficult emotional conflicts after the pain has become so engrained in our lives that far too often, the counseling has little impact. Third, too often the married couples as heads of the families appeared to be emotional strangers to each other and presented little ability to give or receive the support in the normal stresses of family life.
These situations led to serious consideration of whether a program could be developed to assist couples in attaining their potential within the marriage. Would a program directed toward improving such skills as communication, decision-making, and value-role definition be helpful to married couples?

After leaving that position, the author came to Michigan and while serving a parish in Michigan, finished another Masters degree in counseling at Central Michigan University. One of the continuing demands at that parish was to bring together skills for the couples planning to be married and for couples already married but seeking something to enrich and assist their marriages. With the encouragement of my parish and also faculty members at Central, the first unit of this program was prepared—one especially designed for pre-marriage counseling. The faculty observed its use in counseling conducted at the University and heard reports of its use in the parish. One faculty member, James C. Hayes, requested that sometime in the future, the next step should be carried out—one designed for functioning married couples.

Another parish presented more and more demands for these kinds of presentations to be made, including those couples enjoying a functional marriage. It was with Dr. William Martinson, department chairman of the Department of Counseling and Personnel at Western Michigan
University, that I began the exploration of whether or not such a program could be actually printed and used, not only by me, but by counselors, psychotherapists, family physicians, and other such professionals.

Soon after leaving the parish and returning to school to finish my doctorate on a full-time basis, I continued my working relationship with Dr. Martinson and began learning about groups and sharpening my group tools under the critical, demanding eye of Dr. Kenneth Bullmer. Dr. Bullmer was never at a loss for sharp and assertive questions that made it necessary to prune all but the essential from the model in which you will take part. Both professors at Western Michigan University sensed that there was something unique and challenging about this model, and encouraged me to transform this into a manuscript for my dissertation.

Along the way, many couples, both individually and as groups of ten or more, assisted in honest feedback of their impressions of the strengths and weaknesses of the program. Many shared the program with their friends and neighbors, who in turn requested something similar in their communities. Out of all of this came the model as it is presented to you.

One person who gave me most of the feelings that led to the desire to share with others is my caring and loving wife Connie. There were many times during those
years of graduate school and parishes that tried even her patient and loving heart. She tolerated the sound of a typewriter at 7 a.m. on Saturday and our few evenings out. In my particular case, it was the communication process and skills we had learned that brought us through those years. Additional, even before we married, we were fortunate enough to receive pre-marital counseling from Dr. James McHolland, a psychotherapist friend. Through him, we had learned many skills that are at the center of our marriage and also, central to the direction of this program. It was always his belief that marriages rarely gain their potential because couples don't work at marriage fulfillment with the same determination given to their lifework.

From the foregoing, you must realize that this program is, in many ways, an extension of my deep and sincere prayer that through this experience, you might share in the greatest of human experiences, your marriage.
STATEMENT OF PURPOSE

Marriage Enrichment intends to provide experiences, skills, and insights essential to a fulfilling marriage. This program has been built on study of case studies of marriage conflict at the Family and Juvenile Court in Chicago, and Audy Home for Children, and experience from marriage counseling during the period 1970-1972.

In no way do I presume to provide a magical answer to the problems found in the marital relationship, but rather rational, skillful development of abilities found in the existing marriage. It is for this reason that we, together, will emphasize the idea of "normal marriages desiring more fulfilling experiences." Individuals seriously contemplating divorce or separation will find that we build upon the existing trust found in marriage. Each couple will need to consider this condition when contemplating a contract with this program.

A condition for participation in a MEG will include a decision for top priority effort when contracting for this program. Your participation, both in person and in a rational-emotional sense, is required. There will be periods of director input on certain subject areas, but it is assumed and expected that you will participate fully in the program.

Assignments will be given for you to try out new forms of behavior, communication, and understanding.
Your commitment to try new marital experiences with your spouse is the basis for marital growth. Without your desire to try new forms of behavior, you may prefer a traditional social group, such as a country club, study group, or card club.

Essential to this program group is honesty and confidentiality. In a group experience, we depend upon each member to participate, and that information shared will be for the good of the group and not shared outside the group. In this way, trust and support are assured in this experience.

The Marriage Enrichment leaders can be expected to:

1. Be on time and lead the experience.
2. Conduct the group in confidence.
3. Develop the skills of the members of the group.
4. Give sufficient input on vital subject areas (information on communication, sex studies, roles of men and women, etc.).
5. Create a climate of warmth and learning for the benefit of Marriage Enrichment.
6. Be confidential about information shared.

The Group Participants will be expected to:

1. Be on time and prepared to participate.
2. Attempt new behavior and insights as agreed to in class.
3. Participate totally, by being ready emotionally and physically.
4. Attempt to reform self rather than the spouse.
5. Be confidential about all information shared in this experience.
Session I

Introduction

This is an experience that will assist you in achieving a more enriched marriage. Perhaps the first question you might ask is "What is marriage enrichment?" The best way to respond is to indicate what it cannot accomplish. Marriage enrichment cannot create a marriage out of a situation of potential divorce or emotional separation. Such conditions are best served by traditional psychotherapy and marriage counseling. Nor can marriage enrichment work when only one member is interested in discovering the potential in marriage. Such an interested member can perhaps best find help in the therapies mentioned before or from groups available in most communities such as Parents Without Partners, group therapy, and community mental health agencies. Marriage enrichment also cannot work when the experience may be used as an attempt to hurt or humiliate the partner. Your presence in this group is an outward decision to trust each other and become more concerned in the welfare of the marriage.

Marriage enrichment is a program that has grown out of the attempts to find a program, at low cost and positive in nature, that could be adapted to a variety of situations. Perhaps your group is one which is meeting in a church, a school, mental health clinic, or many other
potential places where this program could be implemented with little overhead expense. The underlying agenda of MEG is that, given a variety of experiences and input, you can learn to achieve a higher level of your marriage potential and basic functioning through full utilization of your strengths.

Other couples have discovered that this program does accomplish this agenda because it gives marriage partners the "excuse" to try new ways of relating and decision-making that are normal and consistent with day to day living and that each person has considered at some time. Modern living limits the degree of satisfaction that started most marriages. You might have seen a recent Hollywood production, DIARY OF A MAD HOUSEWIFE, depicting an extreme case in point. You will remember that the husband has become so obsessed with future status and accomplishment that their marriage has become boring and unfulfilling to both the husband and wife. It is not until the economic world collapsed that they again learned to depend upon each other.

Exercise I. Strengths and Weaknesses

For a minute, you are to think quietly about your marriage as it exists and consider the strengths as you see them and individually write these strengths down on your paper. Don't have your spouse view these yet. Next, turn the sheet of paper over and write the areas of
weakness you see in the marriage. Be honest; the only one to read these statements will be your spouse. If you can't think of at least two, maybe you are being dishonest with yourself. We are not talking about failures, but weaknesses, those things which could be better but seem never to achieve that level. Perhaps for you, maybe poor communication of goals, the relationship with the in-laws or lack of affection may be shortcomings.

Now, put one list in your hand with the weaknesses showing. Each member of the couple is asked to share that list with the other member. Go to a part of the room where there is some privacy to communicate. Talk about the list of weaknesses and agree on three that this experience can assist you to overcome. Write those down. Now, in the same way, share the list of strengths as you see them. Decide upon at least six strengths which you would like to affirm or extend during this experience. By affirmation, we are speaking about the answer yes. You are literally saying yes to the marriage as it exists now and the way it can achieve potential as a result of what you will learn in this experience.

What you have just done is to make a contract with each other for the goals of this experience. Some others around you have come to this meeting with specific issues and decisions to be made which are theirs and theirs alone. Each of you will come out with a very individual
goal or goals, but that is your right and privilege.
We do not mold people, we assist people to achieve the
skills necessary to gain the potential in marriage which
is uniquely theirs. There is no magic, other than your
desire to achieve your own potential.

**Exercise II.**

The first step in tonight's session is what is
called "fishbowling." Each couple, taking turns, is
asked to sit in the center of the group. You are asked
to discuss a current decision that needs to be made in
the near future that you wouldn't mind sharing with the
group. Perhaps it is sending your child to camp, the
purchase of a house, a vacation trip, or anything that
has not as yet been decided. Instead of talking as you
normally do, you are requested to speak only for your­
self. Assume nothing about your spouse's opinion or
position on the matter. You will speak in an "I-You"
format. For example: "I desire very much to purchase
this new car for $4300 because I feel we need the depend­
able transportation" (husband). "I too would like to
purchase that car, but the expenditure could eliminate
the vacation I have looked forward to for so long"
(wife). Communication assumes nothing about the other
individual. Clarification comes from precise statements.
Each couple is asked to take their turn in the middle of
the group with their chairs facing each other. The
leader may intervene in order to assist the communication exchange. The remaining couples are asked to observe and after the leader stops the "fishbowling," he will ask for your observation of the communication, both the strengths and weaknesses.

Now that we have completed that experience, perhaps you have a clearer idea of the role of communication. Now for some additional input. We know that people hear only what they want to hear when communicating. You have probably had experiences of telling someone something and discover immediately that although they nodded their head, a very distorted message was being received. This distortion can be either funny or tragic, especially when seen in the marriage.

**Example of Poor Communication**

A counselor was called upon to take care of a roaring fight between a husband and wife. It seemed that the wife was working Monday through Saturday and the husband only Monday through Friday. The wife spent most of her Friday night cleaning and scrubbing the house for a family reunion on Sunday. On Saturday, the husband invited two of his buddies over for the afternoon TV football game and beer and pizza. After the buddies left, the husband fell asleep on the couch. The wife, tired and awaiting a good rest, arrived home from work only to find the living room and kitchen a disaster area.
She awakened the sleeping husband to demand "What in hell happened here?" The husband responded, "We had some fun." The wife, in a complete fit of anger, yelled "Then clean up the mess if you made it." The husband then responded, "Clean it up yourself. My mother raised eight children and worked eight hours a day and the least you can do is clean up the house." The wife, in complete rebuff, then retorted, "Do you know what I think of your mother?"

Well, the argument went on and on, distorted message after distorted message, until the argument got completely out of hand.

As you read this account, perhaps you could remember similar arguments at your home which have the same distortion problem. Perhaps a model of this communication would be helpful. As message is sent out:

<table>
<thead>
<tr>
<th>Sender's Message</th>
<th>Sender's Filter</th>
<th>Receiver's Filter</th>
<th>Receiver's Distorted Message</th>
</tr>
</thead>
</table>

The message that is received is distorted due to the filter system, which is comprised basically of past experiences, old hurts, degree of fatigue, and other kinds of influences. What comes out has little relationship to the input message. The result of this distortion is a return message through the same series of filters that merely distorts the return message; hence the argument, the breakdown of communication that leads nowhere and only hurts.
Perhaps it is possible to assume that such breakdowns happen infrequently. But I'm sure that perhaps those times that arguments have become heated have resulted from just this kind of poor communication. Maybe it was disagreement about the evening out or the decision about holiday commitments that spiraled your communication into an argument. The following series of experiences will assist you in gaining skills to minimize such a round of distorted communications.

**Exercise III. Preferred Communication Model**

We will now return to the discussion you were having during the "I-You" exercises. Instead of the rambling of the "I-You," I want to begin the discussion under the following ground rules:

1. Each person will have an opportunity to share his or her opinion; therefore, you will take turns in presenting your ideas.

2. Instead of formulating an opinion while the other person is speaking, you are asked to listen precisely to the opinion of your spouse. At the end of the expression of one spouse's opinion, you will be asked to REPEAT to the OTHER person's (the one who spoke) satisfaction those things said BEFORE YOU RESPOND.

3. Until you can repeat to the other person's satisfaction, you will not be permitted to respond. The leader will intervene and clarify any misuse of this experience.
4. The discussion will be completed while in a fishbowl. The remaining members of the group will give their observations when the time limit is reached.

As you read this, you probably felt this was a restraint upon your conversation. Perhaps. But this exercise is based on countless observations of couples, both in and out of therapy, that fail to communicate and HEAR the communication of the spouses.

Example of Developed Communication

Several years ago, a young couple was involved in a MEG group experience. They had lived in the same city since their marriage. They had two marvelous children and a beautiful home, in eight years of marriage. It was not until this experience that they discovered that each had assumed that the OTHER was the one that wanted the large, unmanageable house. They threw their arms around each other and later the husband decided to quit his high-paying but frustrating job, for a position in education— one with less financial support but the creative outlet the husband and wife needed.

Exercise IV

You may be among those who don't have this kind of problem to work out, but ask yourself: "Just what have I assumed my wife/husband wanted that I never checked out?" Each couple is expected to go through this experience during this session. Attempt to stay away from
merely safe, superficial subjects that really are not part of your concern. After all, this is an opportunity to discover new and varied depths in your communication.

**HOMEWORK for the Next Session**

You are asked to attempt a five-minute discussion each day at a time regularly set aside. Whether it is at night or during breakfast, make it a time when the demands of children or the tyranny of the telephone will not interfere. Permit yourselves the right to be in regular and consistent communication with one another. Make decisions, set up plans, or just get acquainted, but talk, using the models described and demonstrated during the group experience. Put into practice the lessons learned tonight.

**Session II**

**Introduction**

With the beginning of this session, you hopefully have had the unique experience of rediscovering your spouse, during a walk, or a discussion, or just learning about each other. If you carried out the homework assignment, you have found this rediscovery to be the case. Tonight, you will carry on a pattern designed to discover the additional depths of communication.
Introduction

Communication is carried on at a variety of levels. Many messages are sent and received without the conscious awareness of either the sender or the receiver. For example, picture in your mind the clothing store. The wife comes into the store with only the intention of purchasing a necessary pair of slacks. By the time she has left, she has purchased not only the slacks, but a sweater, a new dress, and a pair of shoes as well. You may be aware that the skilled salesperson can quickly discover the impulsiveness and readiness for the purchase of additional merchandise. Perhaps it was the way the wife smiled when the salesperson told her "You look absolutely devastating in that outfit, perhaps you would like to see the shoes that would look just adorable." The wife has sent an implied message, "I'm very ready to be persuaded about buying these clothes" through a mere smile. Then the process is carried on to the final sale.

You, as well, carry on conversations without the usual exchange of words. For simplicity, methods of communication have been categorized into four general divisions. They are as follows:

1. **Explicit Verbal.** This is the usual series of verbal communications, such as "I want to buy that car." It is specific and to the point and even an observer can capture the general thrust
of the message. This style is preferred in mature communications.

2. **Explicit Non-Verbal.** This is the series of messages given by body gestures with a full intention of receiving a response. The person who crosses the street to avoid meeting you or the person who places her index finger at a restaurant is giving a very specific non-verbal communication. An observer can gain most, but not all, of these messages.

3. **Implicit Verbal.** These are the messages associated with the tone, emphasis, and associate messages given in ADDITION to the verbal message. Take the simple message, "So you are Sally's new teacher." Depending upon the tone, etc., the message carries a variety of messages from warmth to rejection.

4. **Implicit Non-Verbal.** These are the messages that often accumulate during a message. Because they are often not consciously intended and are so general, they lend themselves to misinterpretation. For example, picture in your mind the husband who returns home each night and falls asleep immediately after supper. The wife can interpret from this message, "I'm so tired from work, I really need sleep" to the
other extreme, "You are such a boring wife that I would rather fall asleep than talk to you."
These messages are the least desirable and most open to distortion through "filters."
You can see that you, yourself, are a participator in these forms of communication. Furthermore, you can assist yourself in using more explicit-verbal messages.

Exercise I. Testing Out the Four Levels.

You are to sit down in a chair opposite your spouse. You are to face each other, without touching or talking until asked to do so. As each command is given, you are to carry out the pattern as follows:

1. You are to take turns giving a quick statement about the experience you remember best about your childhood. After each spouse is given a chance, you are asked to respond to that statement.

2. Next, you are asked to take your spouse's hand and communicate your presence or if you wish, put your arms around your spouse. Respond verbally to this experience.

3. Next, you are asked to say the following statement in a variety of vocal tones and emphasis to give a different message, "Football is my favorite way to spend a Saturday afternoon." Use your voice to show anger, strength, sincerity, etc. Now respond verbally to the message.
4. Finally, you are asked to touch hands, but not grasp. You are asked to discover whether your spouse is uncomfortable, sad, excited, or whatever. Respond verbally when you have decided on the message given.

What you have experienced now are the four levels of communication, namely the explicit verbal, explicit non-verbal, implicit verbal, and implicit non-verbal.

An Illustration

Take a moment to remember the period of time that you and your spouse courted. Your first date, if in a car, perhaps placed the husband in the role of acting "cool" or "hip" (implicit verbal); by the conversation (explicit verbal) you decided about the big dance at the school. Depending upon your ability to express by holding hands (explicit non-verbal), it may even be possible to communicate by the expression shown in the eyes (implicit non-verbal) how you felt about each other.

But the routine of living together creates a kind of ambiguity of expression. That "special feeling" is too often not expressed because "the children might see us" or "you'll be late to work, dear" or "cut out that kid's stuff." But it is that series of messages that we felt so important to us during the courting period that is taken for granted and neither partner feels it is important enough to make the effort to communicate.
But the avoidance of those messages is also a message. It is interpreted as "the end of the honeymoon" or "middle-age rut" or other irrational excuses for not using the resources of our courting period. The general implied message by avoidance of the communication is a kind of non-existence that can emotionally warp even the strongest marriage and the two healthy partners involved.

Relationship to Sexuality

Much has been said about regaining the sense of sexuality. Rollo May had described four kinds of love in the tradition of the Western World. They include sex, eros, philia, and agape. Communication is a skill, through which these four forms of love can be expressed.

The four mechanisms of expression, the explicit verbal, the explicit non-verbal, the implicit verbal, and implicit non-verbal are means through which the patterns of expression including love-making are fulfilled. Husbands and wives, when not embarrassed to talk, indicate that the love-making becomes boring because the other expressions are not utilized. Statements such as "What I hate about love-making is how mechanistic it is, she rolls over, becomes passive, and then falls asleep" or "He asks if we can have sex, fulfills his need, and is snoring within minutes--no embracing, no small talk, no excitement. It's like carrying out the garbage," point out the dysfunction felt by some.
**Self-Defeating Behaviors**

What is dangerous for the couples who expressed in the earlier quotes is that they have failed to learn a satisfactory level of communication and then developed self-defeating mechanisms to deal with the problem. For example, the uproar before going to bed, the chronic headache, just one more drink, or the late night television are often the symptoms of dysfunctional attempts at communicating a sense of inadequacy. Patterns also tend to become shared, so that if one partner develops an avoidance game, the other will often develop a kind of competition for inflicting pain. How many marriages have spiraled into this kind of dysfunction is hard to estimate, but I'm sure you know of couples, perhaps even yourselves, that have used this system to some degree. Instead of communicating in an attempt to hurdle the emotional barrier, additional barriers are built which perhaps serve as gravemarkers later for the marriage funeral, the divorce.

In summary, what this writer is trying to say is that you should use the four levels of communication, but emphasize use of the explicit verbal which is less prone to distortion. Time should be set aside to communicate about each other and about ourselves, our dreams and disappointments. In that way, the mechanism for indicating unhappiness is established and not invented.
for an emergency procedure. You will be responsible for expressing yourself, totally and completely, without letting the barriers build up. Your spouse should not only be your lover, but also your best friend.

**Exercise Using Open Communication**

Each couple is asked to go to a corner of the room and discuss areas of irritation that can be identified as self-defeating. Remember, that we are using honesty here to assist the relationship and not as an excuse for inflicting pain. Listen to each other, check out what has been said, and come to an agreement on the method to resolve conflict. Take the remainder of the hour. (An option is a group discussion of the results.)

**Homework:**

Before the next meeting, you are to set up a time EACH DAY that is for sharing the communicating with each other your concerns and experiences. It may be before the breakfast or at night before going to bed or after dinner or lunch together, but the time must be seen as an essential time when you "touch down" with each other. You should be free from the duties of the job, being a parent, or the tyranny of the "haves" and "shoulds" of each day. Whether the time period is ten minutes or an hour, will depend upon you and your needs.
As a cautionary note, please do not let the time merely become a complaint hour about the children or the job, even though that may be essential. Take the time to reaffirm that, no matter what happened during the day or the days to come, there is one person who truly understands and is concerned and that is the spouse.

Session III

Introduction

Probably by this time, you have been tempted to let the homework slide and not be completed for the next session. The reason for the homework is to try out and make practical what has been learned during the sessions themselves. If you have completed the assignments, you have found not only the sessions more rewarding, but also, something exciting happening to your own marriage. It is hoped that you and your spouse can do something about YOUR marriage together. Please continue to work as hard as you initially intended.

"Bad You"

Probably there is no worse critic of you as a person than yourself. As a child, you were told when you were bad but unless you were fortunate, your parents took little time to indicate when you were good. In school, papers came back unmarked except for a grade unless you had done poorly. Then, the paper was filled with comments
about what you had done poorly. At your job, you hear readily from superiors when you have made a mistake, but rarely, if ever, are told that the job you have done was excellent. As a housewife/househusband, you are aware when the food is ruined, the house looks bad for company, or your discipline is wrong; but rarely do you hear when things are efficiently and effectively accomplished. Without reservation, you probably feel a great sense of danger that someone or something will let you know how poorly you have done.

Even machines have their way. This writer was once working on a computer, attempting to transmit some data to solve a problem. Finding a need for a quick break, I went into the hall to get a drink. Returning, the computer had typed out, "Waiting for command. If finished, please sign off, if not, give command." No matter what control I had had before, even this machine was letting me know how poorly I was performing.

What this all comes down to is that each of you is more than aware of your weaknesses and what you can't do. But I wonder if you are really aware of your strengths? Emotionally, you perhaps react to a situation out of fear of potential disaster, and take the most immediate decision necessary, rather than discovering the potential in yourself. You then are reacting out of "fear" rather than "strength."
The Frustrated Wife

Let me present an example of the fear reaction.
Your husband calls home and announces that an important new business associate will be in town and would appreciate a home-cooked meal. Your husband says, "Let's make Jack feel right at home." At 10 a.m., your day is ruined. Your tension builds as you consider the potential disasters that you're sure will happen during the four-hour entertainment period. Instead of planning creatively, you RUSH to the store, your heart pounding because you "just know that the meal you'll plan will either be wrong or be burned to a crisp." So you purchase two of everything, "just in case a second time through is necessary." You ask in desperation for a hair appointment out of fear that "Jack will think Joe married a real loser." Then you remember the children. Even though the baby-sitter said she'd be glad to take them for the evening, you're sure that at the last minute you'll have three "bundles of joy" to contend with as well.

In your hurry to begin the dinner sufficiently in advance, you are careless with your hands and burn the ends of two fingers. Next, instead of really planning the menu, you try to do all the dishes at once and therefore your nightmare comes true. Everything is burned, once more a failure in cooking. Next, you prepare
the table in a hurry and break one of your wedding gifts, an imported wine glass from the set Aunt Polly gave you. Rushing to dress and shower, you find yourself exhausted and tired at 6:30 p.m. You dread what you know will be a catastrophic experience that will convince Jack that Joe really must be incompetent to marry someone like her.

Finally Jack and Joe walk in, relaxed and laughing. Joe says proudly, "I can't wait for you to meet my wife, a person who is really a dream." You enter, and Jack graciously greets you, accidentally squeezing the burned fingers. As you enter the dining room, you are certain that Joe will notice the burnt smell in the air and say something embarrassing. He doesn't, but maybe that extra laugh is just covering his irritation at the burnt smell. Dinner is served and although you aren't really hungry, you notice that the men really enjoy the dinner. Joe then mentions, "Jack, this is why I couldn't let you go out for one more meal. I think my wife's just great." You're sure Joe really didn't mean it and is really very upset. After the table is cleared and the men retire to the living room for coffee, you excuse yourself in order to go to sleep. Later that night, you and Joe have one of the worst fights of your marriage, mainly because of what "Joe had done to me."

If the story sounds similar in any way, the reason is that most couples get into a cycle of self-defeat.
What could have been a pleasurable experience was destroyed by perceptions of a possible disaster. So in panic, the prophecy comes true. A time for mutual enjoyment has slipped by and a relationship suffers through resentment, hurt, and anger.

**Exercise I**

As a group, I would like to have you discuss this story. (1) Are there times that you, too, are convinced that you'll ruin a job or fail at a responsibility? (2) What are these times and what precisely can you as an individual and as a couple do to modify this self-defeating behavior? (3) What are some signals, particularly verbal, that you can give each other when becoming "up-tight" or nervous?

Within this group, each couple has participated in self-defeating behavior for some time. Without question, this kind of cycle tends to eliminate joy from most human experiences. Furthermore, you carry a poor self-image which makes you aware of the lumps, the moles, the freckles, the unmanageable hair, the paunch, and other things that you're convinced are obvious to others when you meet them. So, in desperation, you try to hide them and therefore bring attention to those imperfections. You're thinking about that imperfection so much that you didn't even notice the compliment the other person just
paid you or convinced it was a lie, passed it off. Is there little wonder why you worry?

**Exercise II**

Each couple is asked to take turns sitting in the middle of the circle. Each spouse is asked to give each other positive comments about the assets you see in your spouse. This is to be done by expressing one positive trait at a time with the spouses alternating. When the leader considers the exercise completed, the rest of the group is asked to give additional traits that perhaps were overlooked or reinforce ones already given by the couple. Only after the group is done with each couple, can the couple respond to those compliments. You will feel some embarrassment, but listen, for one of the few times in your lives, you will hear what is good about you.

How do you feel now? Probably you are experiencing a combined feeling of joy, some hesitation, and a mixture of feelings, but that's perfectly fine. In many ways you probably have expected negative reactions to you and anticipate such reactions. Perhaps, as a couple and as a person, you can learn to listen to the positive elements about you and learn what people really find good about you.

The rich and poor, the powerful and the weak, the successful and the unsuccessful have a common feeling that can be expressed as "I only wish I was like ::::: :::::
No matter where you are, you're convinced that there's someone more happy, more successful than you. No matter what you do, your efforts can never be as good or great as the fantasy about that "dream or position" you desire to achieve. The reasons are as numerous as the fantasies themselves, but each person carries with him that basic emotional baggage from childhood on. What is truly tragic is that this feeling of imperfection is given as a legacy to your children.

**HOMEWORK:**

Your assignment is to spend at least a half hour discussing those fantasies that you have carried with you since childhood, asking yourself, "How does this guarantee my unhappiness as an individual and contribute to the lack of potential fulfillment in our marriage?"

This is a wonderful opportunity to share the deeper motivations of your lives and let your spouse hear much of the motivation of your behavior. Perhaps it was that dream that ". . . would finally approve of me if I only could . . ." These are tender, deep moments, so take time to achieve the objectives. Be sure to give support and reassurance to your spouse during and after the homework. This task is difficult because of the intimacy of these disclosures. Make the time rewarding and growth-producing.
Session IV

Introduction

The last homework assignment was one of the most difficult of the program. Most of us have grown up not sharing and letting others know the driving forces that motivate certain decisions. Various tasks appear, to the outside observer, to be unconnected. This is especially true when the driving force is that "someone will discover how incompetent and bad I am." Hopefully, by this time, you have learned from the last exercise and from the homework how defeating and destructive such behavior can become.

Role-Definition

This exercise is an attempt to define the roles that you have as a part of your day-to-day living. You are a father, a husband, a businessman, a son, a brother, State U graduate, a little league coach, a Rotarian; or you are a wife, mother, bridge club member, and many other role figures. The multiple hats of individuals in modern life tend to create a carnival atmosphere. Often, the whirl and noise spins the role expectations into an unattainable set of demands. A look at the average week's schedule for any person in this group will point to the constant over-demands upon your time. Either partner has constant choices regarding time priorities, especially those nights when junior plays his first big
game, daughter wants a family picnic, mother wants to
go shopping, father wants to work on a hobby, or the
grandparents want everyone to come over. Probably your
complaints are most similar, the constant demands create
the unending desire to "give it all up," to flee the
demands and retreat into a simpler form of life.

There once was a man and his family, who lived in
the Florida Keys, who had decided during one frustrating
night of demands to sell the house, quit the firm, and
move to the sea. The man traded in his sharkskin suit
and briefcase for cut-offs and fishing gear to live out
a comparative life of ease. Reporting upon his decision,
he said, "Life had become one giant demand. I was fail­
ing to live either for myself or my family. I 'had it'
one night and I'm glad that I made the decision."

Unfortunately, most of us admire and perhaps even
at times wish we had the nerve to follow his kind of
decision. But, the life we are living, although at
times frustrating, is fulfilling up to a point that we
do not care to make such an abrupt decision. Therefore,
what can we do about our lives? First, much of the
trouble we feel is the result of confusion over roles,
values, and the priorities. When the choice arises to
become involved in a card group on the night usually set
aside for the family, you would have little difficulty in
deciding. But the closer decisions, i.e. business
luncheon (businessman's role) in conflict with lunch with your wife (husband role), you may tend to become very frustrated, especially if the wife and the business firm are putting on pressure for the "correct" decision. No matter what decision is made, either the businessmen or your wife will be disappointed because the husband failed to meet the expectations of both. The exercise that we will participate in now will help to initiate a process of role clarification and setting up a system of setting priorities.

**Role Clarification**

Your life is made up of a series of roles. No matter who you are, there are roles (expectations in terms of behavior and attitude) which are part of your life. The executive at General Motors has the expected dress code, living area, and occasionally, even the social group to which he must belong in order to advance. The hippie has a dress code (denims, open shirts, length of hair, etc.), behavior system (music preference, conversational topics, attitudes, etc.) and definite social group expectations. The demands are often implied and implicit in nature, rarely specified in writing or job description, and are communicated by glances, questions about promotions, exclusion at meals, tone of voice, and other kinds of implicit messages. Role requirements are implied and carried out through variation on this ritual.
Sociologists refer to these as folk mores, but they operate on the modern scene as effectively as the rural folk pattern.

**Example of Role Conflict**

A young man, raised in the East, came to serve as an elementary principal of a small-city school system. Accustomed to the Eastern dress styles, he came equipped with a new wardrobe of clothes for the fall. During the first teacher's meeting, he was given a negative reaction by the older teachers (they refused to sit near him or talk with him), by the board members (they did not invite him along for the board and administrative dinner; it was "unofficial"), and by the community (they took their complaints to the old superintendent). Not long after, he put the styles into storage and pulled out some old sportcoats and suits that were six to eight years old. The change of attitudes was immediate. He was accepted because of his change. Later, one of the teachers told him, "We were so worried that you weren't one of us that we were afraid to associate with you." The message was given with three choices: compliance with local norms, becoming a rebel in the local community, or leaving the community. He decided to stay.

You, perhaps, are aware of the same implied and implicit messages of your roles, but perhaps not to the degree of the example. Your children have certain
expectations of you and you have certain expectations of being a parent. You have acquired these by observing your parents and deciding, either for or against, by applying educational knowledge about what a parent should be, and influencing by the mass media. This complexity creates ambiguity that needs clarification.

Exercise I

You now have an opportunity to clarify your roles. Below are lines numbered 1-10. You are to fill in the roles of greatest importance from the first to the tenth in importance, and underneath put a statement of the greatest conflict that you have with that role. For example: 4 Rotarian

I feel a need to be by myself occasionally without expectations.

1 ____________________ 6 ____________________

2 ____________________ 7 ____________________

3 ____________________ 8 ____________________

4 ____________________ 9 ____________________

5 ____________________ 10 ____________________

As individuals, take fifteen minutes and fill out the list. After some initial difficulty, you should be able to make your role choices. The group is to discuss the roles decided upon for role one and role ten and also
the conflicts associated with that role. The group is then requested to assist each person with that conflict with suggestions as to resolution if possible. Take about 45 minutes to discuss the roles and their clarification.

After the discussion, several observations might be made. You may now be aware that your role choices are different from those of your spouse, but the homework will assist you in exploring these differences. The group should be aware that each individual sitting around the group does have conflict with roles with at least one that cannot immediately be solved. The question is whether the conflict is unsolvable or if the couple itself should spend some time hearing each other concerning the perception of the role and the role conflict, and then discussing the possible resolutions to that conflict.

**Exercise II. Value Clarification.**

After completing exercise I, I want you to be sensitive to the internal conflict which is not only over the role conflict, but also the inter-relationship that it has with the internal value system that is operating. Have you ever considered making explicit the value system under which you operate? Do you value social prominence over artistic talent, or educational excellence over job security? In what order to you actually rank the
values that you hold? If given the opportunity to fill in the following, what would be that list:

1_________________
2_________________
3_________________
4_________________

VALUE LIST
5_________________
6_________________
7_________________
8_________________
9_________________
10_________________

**HOMEWORK:**

1. Please fill in the value list above. When completed, together with your spouse, ask yourself the following question: Am I serving my higher-level values by roles or am I fulfilling the lower-level values or even ones not on the list?

2. Then, turn to the list of roles and role conflicts. Is there a way to resolve the role conflicts or rearrange the role choices to cope better with the list of values above? Please spend at least one hour by yourselves in working on this exercise.
Session V

Introduction

The homework assignment given during the last session brings to mind that perhaps perceptual differences exist not only within each individual, but also between spouses. As you worked with the lists of roles and values, you found yourselves differing about how you SAW EACH OTHER'S ROLE. This difference is the whole reason for including the exercise in the sessions and working at resolution now.

Each of you initiated your marriage with very strong ideas of what married life was to be like. Depending upon your home experience you either accepted, rejected, or modified the examples given by your parents, particularly, and significant other couples that you viewed, such as married siblings. Based upon those examples, you may have spent some time adding on information from reading, discussions with friends, and experiences gained during your single years. You learned to deal with men/women in a certain way and decided some time ago how to relate to them. This system of expectations is often never discussed before marriage and only comes to light after the honeymoon.

Example of Spouse-Role Expectations

A simple explanation of this matrix of expectations is appropriate. Ten months after their marriage, Joan
had noticed Ralph seemed rather depressed and lacking any spark, either at work or at home. She called a psychologist and arranged a series of appointments. Ralph shared, during these sessions, that he has difficulty letting Joan work, even though the salary was giving them a better living budget than his alone would provide. He elaborated this story by pointing out that he never had known close to him that had ever worked. In fact, in jest, his father had once told him that any man that permitted his wife to work wasn't worth being a husband. Furthermore, his mother had spent most of her life in the home preparing baked goods and keeping the house like a showcase. The thought of permitting his wife to work, no homecooking of any kind, and an unfair joke by his father was more than overwhelming his sense of manhood. His depression was in a cycle because until the internal expectations could be resolved by agreement with his wife, the depression while married would tend to continue. After several months, he learned to accept his wife's role and to have his own value system accept that decision. Furthermore, the wife agreed that she would indeed like to bake occasionally on week-ends, but had refrained because he had not expressed that very desire.

Exercise I. Role Interplay

This short description points out the interplay of these internal systems. This example may prompt some
understanding of the internal systems that you have within. For about twenty minutes, as couples you are to find a corner of the room to examine the following questions:

1. On a 1-10 role description, describe the roles as you would like to see in your spouse, 1 being the most important and 10 the least. You may also want to indicate the origin of those roles.

2. As one spouse is talking, the other is asked to write down the various points in order to present them within the group. This mutual sharing is essential to the growth of each person and couple.

In the group, the leader will conduct an informal survey of the role descriptions desired and origins of those desires. Be open and supportive of the persons taking part in this particular experience. There are no right or wrong roles, but rather, the roles which are comfortable for each couple.

**Exercise II. Marital Responsibility Inventory**

Now, since the format has focused on understanding the roles, we move into an area which is the harvest of the work done thus far in this session. The Marital Responsibility Inventory is the basic tool for exercise II. As you read the directions for this particular exercise, you will notice that there are 45 basic duties
shared in most families. You are to go through the list and fill out the inventory according to the system that will best work for you. The idea is that an agreement is to be attainable and practical based upon the current situation. The tendency for most couples is to be looking at the ideal, rather than an actual possible outcome satisfactory to both.

Marital Responsibility Inventory

You are asked to read the following series of statements concerning day-to-day responsibilities of two people living together. Based on your reaction, score the inventory by enircling H for the husband, W for the wife, B for the wife and husband together, and O for other persons (either hired or services contracted for) as the person responsible for that activity.

H W B O 1. Deciding who will be invited for parties and dinners.

H W B O 2. Caring for the children after dinner.

H W B O 3. Purchasing cards and gifts for family and friends.

H W B O 4. Calling or writing to relatives.

H W B O 5. Selection of the furniture for the house.

H W B O 6. Selection of the automobile, home, and other large purchases.

H W B O 7. Maintenance of the family automobiles.

9. Getting dinner (evening meal).


11. Staying home with the children when they are sick.

12. Doing volunteer work in the community.

13. Planning the meals and purchasing grocery items.

14. Mending the clothes and replacing when needed.

15. Going for school conferences for the children.

16. Paying the family bills and watching the budget.

17. Decisions as to the evenings together as a couple, as to the selection of company, the place to go, and the time to return.

18. Setting up and carrying out a program of disciplining the children.

19. Setting aside time to spend with the boys in the family.

20. Setting aside time to spend with the girls in the family.

21. Clearing the table and washing the dishes.

22. Cleaning the house including the dusting, vacuuming, and scrubbing.

23. Washing and drying the clothes.

24. Getting the children ready for bed, including baths, storytelling and discipline.

25. Setting up the securities for the family including insurance policies, savings accounts, security boxes, and major financial planning.

26. Deciding upon the children's behavior expectations when at home, visiting, at school, and when outside playing.
27. Deciding where holidays are to be spent, including relatives, vacations, etc.

28. Mowing the lawn and basic outside chores such as shoveling the snow, trimming the hedges, and raking the leaves.

29. Purchasing the hobbies and playthings for the children.

30. Selecting and hiring of babysitters.

31. Selection and planning of the family vacations.

32. Taking the children for medical appointments.

33. Deciding how the weekday evenings will be spent, for work, recreation, community groups, etc.

34. Teaching the girls about sex and seeing to the basic hygiene necessary.

35. Teaching the boys about sex and seeing to the basic hygiene necessary.

36. Selection and decision-making about religious activities for the family.

37. Tutoring the children, if necessary, with their homework.

38. Getting up with the infants or children if sick during the night.

39. Cleaning up the floor if "accidents" happen either to infants or children.

40. Deciding when a good time to bring up grievances and conflicts at an appropriate time before they become too difficult to talk out.

41. Selection and assisting the children with post-high school plans including colleges, technical schools, jobs, or the armed forces.

42. Writing to the children when at camp, at school, on trips, or in the service.
43. Attending the children's plays, graduation exercises, and important programs.

44. Planning the weddings of the children as custom dictates (groom's parents or bride's parents).

45. Making the initial appointments with a marriage counselor, psychologist, clergyman, or those who might assist us during time in our marriage.

After reading this list individually and selecting the answer, compare your answers with those of your spouse. Again, there are no right or wrong answers, but it is very important to set up a group of mutual expectations, similar to the job descriptions so much a part of the American business and professional scene. Often, the simple process of sitting down and planning the mutual expectations eliminates areas so often the beginnings of harsh arguments.

One couple wrote, after taking and discussing the Marital Responsibility Inventory, "Jim and I had argued for four years of our marriage. The arguments were over the usual things such as dishwashing and selection of company, but we never really did anything about the arguments. The give and take required to complete this form taught us the formula for marriage was give and take."

In comparing your answers, you may disclose responsibilities on which you cannot agree. If in the time remaining you cannot find a solution, take an hour at
some other time, and through give and take, arrive at an agreement. Remember, there are no winners in marriage, only the marriage gets stronger or weaker. You may have to compromise on strong opinion areas such as accepting a responsibility you don't want in order for your spouse to take something he/she doesn't want. When you are finished, you will have a contract or a job description emerging from the role definitions and value priorities decided upon earlier.

**HOMEWORK:**

Take the Marital Responsibility Inventory home and work on the loose ends not completed during the time allotted. Then, try to implement the changes in the expectations at home. Observe whether or not the decision-making permits more intimate times, more mutual and individual times to enjoy life as a result of resolving the minor issues that formerly were launching pads for serious disagreements. When the Inventory is complete, use the additional form to make a plan and put it away in a file to be reviewed when necessary.

**Session VI**

**Brief Study of Sexuality**

Probably no area of marriage evokes less couple communication than that of sexuality. Information about sex needs was essentially transmitted, at best, through
some very nervous parent or at worst, through the shar­
ing of ignorance with close friends. Exploits demon­
strating sexual prowess are favorite topics of conver­
sation when people gather, especially in locker rooms,
at parties, and at pubs, part of the underlying anxiety
about basic sexual roles and information.

For example, masturbation is an essential part of
each person's sexuality, beginning with mere touching
and fondling of the genitals while children to eventually
having an orgasm as the physical mechanism matured. But
due to the impressions drawn from the glances and threats
of parents and others, we either denied this basic sexu­
ality or decided it was so personal and fearful that it
created real sexual anxiety in later years.

Adults counseled concerning the aspects of their
married life, normally even the couples married the
longest and with several children, lack the ability to
understand the basic sexual function of their bodies.
Therefore, due to lack of knowledge and basic anxiety,
these same persons find themselves unable to find ful­
fillment in sex.

Female Anatomy

The best way to begin to present this topic is
with some basic information regarding the anatomy of the
female and male; first the female. The genital area of
the female is referred to as the vulva ("the covering"),
which amply describes the covering over the internally placed female sexual organs. The area above the actual opening is referred to as the MONS PUBIS (or "mound of venus"), which is fatty tissue covered by the actual pubic hair which makes it appearance after puberty. The genitals are protected by an outer opening called the major lips, and depending upon the individual, is either closed or in an open position. The inner surface is smooth and hairless while the outer surface contains pubic hair. The minor lips are rather pinkish-looking folds of skin located between the major lips. The area between them contains the openings for the urine duct as well as the vaginal opening. Located on the rim of the minor lips, as you see in the drawing, is the clitoris. The clitoris functions as a nerve center and, when stimulated, creates pressure and stimuli for the sexual climax. The clitoris resembles, in its function, a miniature penis and when stimulated like the penis, becomes filled with blood until released by climax or deliberate relaxation (when an orgasm in not reached).

The hymen, the pinkish membrane, covers the vaginal opening. Depending upon strenuous physical exercise or sexual experience (either intercourse or excessive petting) or basic human differences, the hymen may or may not be intact at the time of the honeymoon. The concern over the hymen, as evidence of virginity, still carries
some mysterious importance to persons not knowledgeable about anatomy and basic sexual process. For example, the last four decades have seen women becoming more physically active than past generations, including activities such as gymnastics, running, and many vigorous sports, resulting in broken hymens due to sports. Thus, pre-marriage counseling must help the couple to understand these facts.

Painful entry into the vaginal opening is caused not normally so much by the "first time" issue, but rather by the extreme muscle tension caused by a worried, anxious, and fearful female. It is additionally difficult due to lack of physical preparedness, essentially the poor lubrication from minimal or no foreplay. Many women have the hymen cut by a physician in a minor operation before the first sexual experience.

The internal sex organs of the female consist of the ovaries (usually two) and the fallopian tubes, the uterus, and the vagina. The ovaries carry on the double production of two female hormones, estrogen and progesterone. Though shaped similar to the male testes, the ovaries are smaller. The ovum (the immature egg) proceeds from the ovary through the fallopian tubes to the uterus, where, if sperm is present, it becomes fertile.

As you can see from the drawings, the vaginal opening leads into the vagina proper. The penis, when
inserted, can be accommodated by the vagina, particularly if lubricated as a result of direct petting before the actual insertion. Inadequate lubrication in the female can be overcome by the use of a sterile jelly, easily purchased at any pharmacy. The size of the penis is irrelevant when it comes to the vagina, for it can stretch to accommodate any sized penis. The mystique of the giant penis is neither proven scientifically, nor by reports of females. The actual use of the foreplay and pleasure in sexual expression is more important than actual penis size.

The sperms, when discharged during intercourse, travel into the uterus and if the ovum is present, fertilization may take place. The fertilized ovum is implanted along the prepared nourishing walls of the uterus. Here, the fetus will grow until birth, then travel out through the vaginal opening.

Male Anatomy

The male genitals are easier to consider since the majority are outside the body proper. The urethral meatus (the head) is the meaty, bulb-shaped section of the penis at the end of the shaft. It is usually covered by a skin covering that is most often removed at birth by the physician in a minor operation called circumcision. The purpose of this is to permit the head of the penis to remain clean and free from collection of
bacteria. The shaft of the penis contains a tube through which both sperm (the male sexual units) and urine (human liquid discharge) are carried. Surrounding the tube is a network of blood vessels and nerves which become filled with blood and stimulated during sexual arousal, causing the erection of the penis itself.

Internally, the male organs are the testes (responsible for production of sperm), a series of ducts for the transport of the sperm through the body to the penis. The testes also produce the male hormone, testosterone. This elaborate system produces millions of sperm that travel to the penis and then through the ejaculatory duct. As was indicated before, the urethra conducts both sperm and urine, but never at the same time. The body is equipped with a kind of "shut-off or one-way valve" that shuts off the flow of urine and permits the reproductive system to carry on its duties.

During sexual arousal, the penis becomes erect and enlarges. The smaller the penis in the flaccid stage, the larger in proportion it becomes in erection, while the larger the penis, the less large it tends to become. Probably every boy has gone through a time of viewing the penis of someone taking a shower or standing at a urinal and envying a penis larger than his. What is harmful in such a perception is the sense of inadequacy and humiliation that is too often a part of the adolescent
years and too often in never resolved. How many men feel weak and powerless, or refuse to take part in physical exercise, because of the "small size of the penis" is hard to imagine.

Orgasm can be brought on in a number of ways. First, mutual masturbation is a normal, expressive means to orgasm. In this case, the male uses the normal forms of arousal of the female by talking, by touching of the erotic areas (breasts, ears, nose, lips, back, and individual choices), and finally the clitoris itself. By light pressure and vibration, the clitoris can become engorged and very sensitive, therefore ready for climax. The female carries on similar forms of arousal by stroking and touching, each with their own preference for arousal. Finally, the penis and scrotum (the sac) is stroked to erection and finally orgasm. This form of orgasm is normal and a healthy form of sexual expression.

Second, orgasm also can take place using the arousal techniques described for masturbation, but with eventual actual insertion of the penis into the vagina. The time necessary before the actual insertion varies with individuals; with some only a few minutes are needed, while others require an hour or more. When inserted, both the male and female use a variety of up and down, rotating motions that continue the arousal to orgasm. I deliberately did not use the adjective "mutual" or "simultaneous"
since that is not necessary for enjoyable sexual expression. Some couples can become obsessed with timing. There are techniques, including longer manual stimulation, that work, but should be used without losing the spontaneous quality of their sexual expression. Much of the "frigidity" and "tightness" could be minimal if only the couple could express before, during, and after sexual expression what "really turns me on sexually." What is stimulating one night may not be desirable the next, and it is a mutual responsibility to express sexual needs as they change.

The frequency of sexual intercourse is up to the couple themselves. Excessive tiredness, illness, depression, and tension can minimize the need for sexual expression for one or both and should be communicated not as an escape from sexual expression ("I've got a headache" three times a week) but an open and realistic adult communication of needs, including no need. Also, accepting the fantasy and stories about sexual giants guarantees real unhappiness. The need to prove oneself by multiple orgasms (either male or female) makes sexual expression a kind of competition that is destructive. The frequency varies from several times a night to once a week at other times, and even, for others, once a month. The number is less important than the quality of expression and the fulfillment of each person's needs.
Another form of sexual expression is individual masturbation. When couples become set in a pattern of sexual release and enjoyment, temporary outlet termination can be difficult. Illness, pregnancy (after six to seven months), and physical separation (trips out of town, etc.) can create a build-up of tension due to the inability to express through sexual intercourse. It is normal and healthy to use self-masturbation as a technique for sexual tension release and to enjoy the physical sensation. Within marriage, it perhaps is desirable that a couple rely upon either mutual masturbation and sexual intercourse in a regular expression. However, for the person to use the physical means of self-masturbation is perfectly acceptable and "normal."

The guilt that either the male or female has if using either form of masturbation can be destructive. Far too frequently, people feel that there is something evil and wrong about the use of masturbation, and therefore refrain from or use masturbation with extreme guilt. You must learn to appreciate your body as a beautiful system of normal responsiveness for which you have no need to feel guilty.

**Contraception and Uses**

Finally, contraception (prevention of pregnancy) must be considered by each couple; hopefully, before the actual marriage, if possible. There are various
forms of contraception that are possible. First is the birth control pill, which, used under doctor's care, can be 99% effective in preventing pregnancy. Next, an intra-uterine device, a coil or loop, which is inserted into the uterus, thwarts the implanting of the ovum. Another device, the diaphragm, is an individually designed, cup-like object, placed in the woman's vagina with the use of sterile jelly, again to prevent conception. Next, a foam (anti-sperm composition) may be put in the vagina just prior to intercourse. The effectiveness of foam alone cannot be depended upon, but with the use of the condom (safe, rubber, sheath), it can be very effective. The condom is a soft, skin-like form that slips over the erect penis, and if it does not have a miniature hole or doesn't slide off while in the vagina, it is effective in containing the sperm, thus preventing fertilization of the ovum. The rhythm method (intercourse only during non-fertile times) is not very effective due to the irregular fertile period. The withdrawal form of contraception, withdrawing the penis just prior to ejaculation, is also of limited effectiveness because the head of the penis often has some sperm on it (secreted for lubrication) and also, the ability to withdraw depends upon judgement at a time of being least rational.
Of great importance is the decision whether contraception is to be used and in what sequence. Planning for children so that each child is wanted and planned for is still the best way to begin being parents. Planning family size is too important to be left to chance or what just happens. Any person who goes to shop for groceries and other family needs knows how very difficult it is to maintain a budget for a family. I am not asserting my beliefs as to the number of children you should have, but rather asserting that the couple make a mutual decision as to the planning and spacing of children to give optimal growth to the couple and to the family in an emotional as well as economic context. The husband who has to work two jobs to support a giant family can testify to the inability to act as a real parent to the children.

Spontaneous Sexual Expression

Sexual expression implies an emotional readiness and spiritual awakening to the other's presence. Sexual expression alone is possible without the emotional readiness; however, it can become mechanical and unfulfilling. Outside actual physical dysfunction (tumors, diabetes, high blood pressure), the limitation to sexual expression is not permitting the experience to become enjoyable. Some couples, perhaps even you, depend upon a semi-schedule of times for sexual expression. But
the regularity of "every other night at 10:15" loses the appeal that comes from the occasional, spontaneous, mutual sexual enjoyment.

An Example of Sexual Rediscovery

We have struggled successfully to be mature, rational human beings and should never let go of our ability to really play. Nothing has happened to your sexual lives that could not be assisted by permitting yourself to play sexually rather than to act grown-up. One couple came to their psychologist one day looking tired and listless. Mr. and Mrs. R were successful professionals in the community, with three grown children, and satisfied material needs. After some preliminary conversation, they finally presented their case. They were bored with each other because everything could be predicted day after day, even the procedure for sexual intercourse. After a few sessions and a physical examination by their physician (to eliminate any possible physical problems), it was recommended that they rent a cabin for a week in an isolated area. No television, no radio, nothing to prevent trying out some new relationships. Instead of getting up for breakfast at a specified time, they were to prepare meals if and when they got hungry. Instead of wearing the accepted clothes of the suburb, they were to wear revealing and sexy clothing as they desired. Instead of pajamas, they

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were to sleep nude under a warm comforter and with a fire in the fireplace. Instead of restricting their love-making to the bedroom, they were to occasionally attempt intercourse in the woods, in the lake, or anywhere their impulses determined. After one week, they called and said they were going to stay for an additional week.

After returning to their home, we established additional appointments. Their self-report revealed that it was initially quite a struggle to play, but after two days, they began to let go. The exploration of each other's bodies with no time limit, no pressures to be somewhere, and in a setting not predetermined, brought their sexuality to full bloom. Mrs. R reported that she could remember the speeches she received from a well-meaning mother and aunts about the sinfulness and wickedness of women who let themselves go during sex. Fortunately, she was finally able to shed that image and its accompanying guilt. She learned there was really nothing to fear about her own emotions and that she could trust them during a playful experience with her husband. Mr. R discussed that his own upbringing in a strict home created a mystical fear of women and the need for the boy to protect the woman from his "own evil intentions." Even during marriage, Mr. and Mrs. R had to finally let go of those old messages that had
reduced their relationship to a condition of boredom. Perhaps you could identify with the illustration given above, but each person has retained messages about letting go sexually, masturbation, climax, and other titles which have limited the ability for real sexual expression.

Exercise I

One of the first steps to full expression is to become educated about the sexual response of men and women. Much of what individuals believe about sex was gained from friends and dime-store novels that perpetuated those myths, and actually limit their ability to attain both their mental and physical potential. Your leader will give you a list of books that would make good reading not only for your use, but also to assist you when the time comes to help your children in sex education, a real opportunity to refrain from passing on inadequate knowledge.

In beginning, the leader wants to talk first to separate groups, split up as males and females. A reporter is to be appointed to write down the responses from the group. Each person is asked to share three unsupported beliefs that you now have about sex and, without using names, the person who taught you these myths (parent, teacher, priest, minister, physician, etc.). Also, you are asked to make up four questions to
ask the leader to clarify about sex during the later group session. For example, is it true that women can have more climaxes during an evening than men?

After about forty minutes of meeting separately with everyone taking part, the entire group is asked to reconvene. The leader will write down the myths that each group came up with during the session. You will have about twenty minutes to discuss these myths. Next, the four questions from each group will give you an opportunity to share mutual concerns about sex and sexual expression, under the guidance of the group leader. Don't hold back because of initial embarrassment; this is an excellent opportunity to share your concerns.

HOMEWORK:

You are asked to take a day, Saturday or Sunday or whatever, and arrange some time with each other. If you have children, take them to a babysitter or leave them with someone and go to a motel or cottage, but don't be playing mom and dad. You're going to try to be kids for 24 hours. Your job is to take walks, sleep and eat when desired, wear revealing clothing, touch and be touched, enjoy several opportunities to become children. You are to become sexually aroused, but refrain from sexual intercourse until the arousal is at such a peak that it is impossible to abstain any longer. If you feel free, attempt to try new positions and delay climax to the
last second. Permit yourselves the enjoyment of feeling the touch of the other person without schedules or worries and become free with each other. If you always eat your meals in the kitchen, take a hike and eat a picnic or eat in front of the fireplace or anywhere it can be enjoyed. Don't rush--be a kid again--feel the freedom and the closeness.

If it is impossible to leave home do the homework at home, while your children are gone overnight.

Session VII

Introduction

After this last assignment, you probably discovered the barriers you have created to the expressions of warmth that are real and wholesome. Caught up in a world of modern living, with no real time to recapture the simplicity of human expression, there is no time like the present to reinstate that expressive system.

One of the barriers to expression is that old hurts and resentments build up during the marriage. Many of these can be dealt with individually as a couple or on your own time using the communication models described in earlier sessions. But one area that seemed to reoccur in marriage enrichment classes over the last five years has been the question of the role of in-laws within the life of the family.
Family Life Patterns

There are two distinct, general forms of family life in the United States, and depending upon your experience, are seen as normal. The first is the Extended Family, where the various relatives live in physical closeness, sometimes in the same house or neighboring farms and houses, and have frequent contact with each other. Grandparents, aunts and uncles, cousins, and all family members are part of a group of relatives that sustain and support each other. In much of the early history of this country and in some parts even today, this model continues to represent family life. If you were raised in this way, family gatherings were very important and gave you an identity and roles that were expected to be carried out. If you left and moved elsewhere, you look forward to reunions and trips back home to continue the extended family. If you have learned to depend upon family members instead of friends, then depending upon yourself is more difficult, even emotionally trying if required to do so.

A majority of families since the Second World War (1945), due to its economic move to the cities with its increased educational mobility, has created what is known today as the nuclear family. Made up of the husband, wife, and children, families are a self-sustaining
nuclear group. You depend upon friends and business associates, or even hire service agencies, to carry on the same needs that were fulfilled by the extended family members. Instead of having the nearest aunt care for your children, you either hire a babysitter or put your children in a day-care school. Social activities are mostly individual or with friends, with only occasional trips to relatives for special holidays or celebrations. Perhaps when you have returned home for those short trips, you may feel comfortable for only a few days because of the dramatic differences in life styles and lack of dependence upon the other family members.

This is especially true for the college-educated, but is also true for people who moved to the city for better jobs and better schools for their children. You tend to define yourself more by professional identity (dentist, teacher, etc.) than by the extended family, such as "one of the Jones brothers." The extended family can sustain itself even though one of the members of the nuclear group, such as the husband, can't keep a job, because the grandfather will see to it that at least he can work on the family farm. But in the autonomous nuclear family, if one spouse is weak or the relationship is lacking, there is no one but outside social service agencies to carry on these functions.
The nuclear family puts great weight on the marriage partners.

**Example of Extended Family Dependency**

There once was an extended family that encompassed a nuclear family that had some difficulties. The wife felt incapable of being a parent, setting up rules, and caring for the house. Because of the extended family, an aunt who had never married, became the parent, permitting the non-parenting parent the opportunity to seek work in a factory. Nothing was really lost, the children grew up with guidance and nurturance from this aunt.

On the other hand, the nuclear family that has a non-parenting parent will request help from the school, church, and social service in order to carry out the guidance necessary for the children. Agencies, including child guidance clinic, give guidance and rules in order for the parent to be a marginal parent.

The importance of this change for the marriage enrichment experience is the opportunity to resolve the relationship with in-laws in a constructive, non-destructive way. No right or wrong way to resolve these differences is assumed, but rather one that is desired by each individual couple.
One of the ways children declare their independence is to cut off all relationships with in-laws and attempt to go through life without in-law contact. Unless there are circumstances that cannot even be tolerated by the couple, such a decision simply postpones the resolution of the relationship. It has been the observation of persons who have made such a decision without attempting some minimal contact that they become increasingly distraught as parents are unable to relate to their children in some manner. There are situations such as serious mental conditions (violent, abusive, and acting out), but these are minimal cases. Usually the decision is made after a misunderstanding or argument that does not permit a resumption of minimal contact. Perhaps the contact should be made to some degree but not out of guilt or shame, but rather out of a need to resolve the relationship in an adult way.

Holiday Conflict

In-law conflict becomes most acute during holiday seasons, with the question of visiting "the folks back home" and "whose turn is it this year." There is something about the Christmas season, Easter, and other special holidays that requires special arrangements. One couple set up a program where they would limit those
visits to a twenty-four hour period, always followed by at least twenty-four hours together alone. It was their opinion that although the in-laws were intolerable for longer periods during such a short period, everyone can tolerate the differences of religion, etc. to share in the festival together. Another couple always had hotel reservations in the city where the relatives lived so that after six to eight hours, when the in-laws became excessively vocal in their opinions, they could always return to the hotel or go out alone for a personal activity.

Perhaps you are fortunate to have at least one set of in-laws that you honestly enjoy visiting and spending frequent vacations at their homes. You really don't have a difficult time unless the spouse with whose parents you don't spend much time feels that his/her parents are being somewhat ignored and has not communicated this feeling. The more difficult problem is when you have two sets of in-laws with whom you have to divide the holidays. The question of "claims" upon your holidays can be a deep source of resentment.

Exercise I. In-law Problem Resolution.

For forty minutes, the group is to discuss (with some time for every one) the question of relationships with in-laws, particularly indicating the arrangement
you have made in that relationship. If there are definite areas of conflict, you will have time to work on this very special problem. The leader will request that each person, not each couple, respond to this problem from his/her perspective. Again, we are trying to avoid the idea of a "spouse assumption."

Now, after the forty-minute discussion, the group is to draw up twenty possible resolutions to the question of in-laws and identify by purpose of the resolution. The leader will facilitate this activity, but this requires your imagination and cooperation. The leader will write these on the board at the same time, and each couple is asked to record them individually.

Next, each couple is to retire to a corner or private area either in the room, outside, or somewhere in the building to fill out the remainder of this exercise. Take a pad of paper and two pencils with you. After intensive discussion, you are asked to fill in the following:

In-Law Adjustment Scale

1. We feel that our closest relationship exists with __________ and because of their unique quality of _______________ we enjoy the visits: (circle one) totally, usually, some of the time, during short visits (8-24 hours).
2. With the other set of in-laws, we have decided to ____________________, not out of spite or rejection, but out of a realization of the limits of the relationship. Therefore, we intend to spend: (circle one) more, the same, less, none of the time with them.

3. We recognize that our relationship with the in-laws is: (circle one) primary, secondary, peripheral, non-existent, and understand that this is done for the needs of our nuclear family.

4. We intend to explore the establishment of better communications (mail, telephone) with ____________.

5. Holidays will be spent on the following covenant between us as a couple:

6. Our children will be able to establish a meaningful relationship with ____________ with the following understandings:

7. Because of our differences concerning our in-laws, we will be careful not to attack, but to understand and communicate our needs and desires before making any decisions. We will do this by______________________.

You probably need some additional time for working on the complex problems of in-laws and how to deal creatively with them. As a part of the discussion is an emotional
response to those relatives because, even though they seem overbearing and unreasonable at times, they are our parents and we do have some kind of a relationship with them. What we have tried to do is to create an atmosphere where internal communication can become explicit and verbal in nature, and as free of resentment as possible.

**HOMEWORK:**

You are asked to look over the seven sessions thus far and complete any homework not yet completed. Then, you are asked to use the short conversation time to discuss ten fun activities that you would like to do either separately or together as a couple. Also, you are to set up three goals that you would like to achieve SPECIFICALLY in two years, and three goals that you would like to achieve in twenty years. The idea is to make some plans to implement for optimal use the intentions of the sessions thus far.

**Session VIII**

**Introduction**

During the last seven sessions, you have had an opportunity to discover ways of adding to the potential of your marriage and to yourself as a person. Each section includes several areas that need to be expanded by you during the years ahead. The reading list at the
end of this manual includes books that will add dimensions to your understanding of marriage that is a process rather than a state of life. During this session, you are asked to set up a contract, evaluate the group experience, and basically pull together the ideas into something that makes real sense to you.

Exercise I. Communication Contracting

Each couple is asked to take a place somewhere in the room. Sit down on the floor, facing each other, knees touching, holding the hands of the spouse in yours. Don't pay attention to the couple nearby, what they are doing is not important to you. For fifteen minutes, without losing each other's hands, you are to verbally tell each other what this experience has meant to you as a person. Assume nothing, tell what's on your mind.

When the leader signals, you are to stop talking and instead using the touching of the hands, embracing, touching, even a kiss, and communicate your feeling toward your spouse. Permit yourself the freedom of feeling the touch and presence of your spouse. Take fifteen minutes to complete this exercise.

As the exercise is completed and the leader feels ready, move back into the group itself. For about fifteen minutes, share those things which meant the most to you as
a person. What changed about your relationship? What kinds of things do you look forward to in the near future? Each couple is asked to respond to this series of questions. Do you feel something special when you are near your spouse, and in what way?

**Exercise II. Positive Feedback**

Next, as a group, take turns telling each individual the positive qualities that you see in her/him. Each member of the group is asked to indicate those qualities without that person responding. Finally, the person to whom these statements are directed is to respond concerning his or her feeling about those statements and other feelings (positive) that have been discovered. Don't be afraid of liking yourself; you've lived too long knowing just what's wrong with you, so listen to the positive qualities.

As the group process is finished, the group is asked to respond GENERALLY to the idea of positive reinforcement of their qualities. Answer the following questions: Doesn't this knowledge equip you with the strength and desire to live life a little more creatively and positively than before? Are you willing to tell and hear these positive qualities from your spouse and acquaintances? If you do, you're on the road to greater marriage potential.
Exercise III. A Time Alone

The group generally meets somewhere where a walk is possible; either through the city, the woods, or across a campus. Take your spouse for a walk, thinking and sharing about the following questions: How do I demonstrate love and how is love demonstrated to me? Take a thirty minute period to consider the input that your spouse is now giving and decide how to implement better ways of learning the signals that we need love and also when we need to show love. Perhaps there are more productive and creative ways than were used before. Based on what you have learned during the previous seven sessions, implement at least two new ways of giving those signals.

When you return to the group, you are to share with the group the observations you have made and any decisions that were implemented. This means that others in the group benefit from your work and may get an idea of how to set up a new pattern of behavior. Take twenty minutes to finish up this particular exercise. The leader will assist you if there are any questions.

Exercise IV. Marriage Contract

You have before you a MARRIAGE CONTRACT. In many ways, when you got married, there were many parts of the contract that were not verbalized nor even shared with each other. The past seven sessions have been an attempt
to bring into verbal sharing those implied messages of marriage. You will notice that each section deals in many ways with the past sessions. Finally, at the end of the MARRIAGE CONTRACT, you and your spouse are asked to sign the agreement. In this way, you bring together the gains over the hours you have spent in working at your marriage. The leader will sign the contract. He will not read it, but his signature will remind you of his part in assisting in the implementation of the MARRIAGE CONTRACT.
OUR MARRIAGE CONTRACT

In deep awareness that marriage must include sincere understanding and agreement, we have taken this opportunity to draw up and declare this contract of our marriage. We acknowledge the need to reopen and renegotiate the contract when the need arises or, in one year, whatever occurs first.

Section I

A. First, we declare and accept the following in each other as human faults which need not lessen the love nor the goals of marriage:

1. 
2. 
3. 
4. 
5. 
6.

B. Second, we believe that the strength of our marriage exists because of the following specific strengths:

1. 
2. 
3. 
4. 
5.

Section II

Included in our contract are statements concerning the following items which declare expectations mutually:

A. With our in-laws we promise
B. With our home (house or apartment) we promise

C. With our children we promise

D. With our pets and hobbies we promise

E. With our family discipline we promise

F. With the job responsibilities outside the home we promise

G. With holidays and vacations we promise

H. With our evenings at home we promise

I. With the responsibility of time with the children for education and ethical training we promise

J. With the responsibility of having guests, preparing and cleaning up, we promise
K. With the responsibility of housework we have decided

L. With the old memories and old resentments that hurt our marriage, we promise and have decided

M. With appreciation for the worth of each other, we will indicate this worth by

N. Other:

O. Other:

Section III

We recognize that specific goals are essential for growth in our marriage, so we take the time to declare our intention.

A. Instead of broad, general, unattainable goals, we state as the goals for the next three years:

1. 
2. 
3. 

B. In order to attain these goals we have decided this day to do the following:

1. 
2. 

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Section IV

Statement of Love. A realization that one is loved and that one loves is essential for personal mental health as well as the health of our marriage: In response to this realization we declare the following:

A. Statement of wife's love of husband:

B. Statement of husband's love of wife:

C. Mutual statement of our marriage:

Date____________________ Signed,

__________________________
__________________________

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Conclusion

You have shared with hundreds of other people who have taken the time to discover very natural and simple ways of strengthening the marriage that you as a couple wanted. Many of the ideas presented were as a result of efforts of the early groups as we added and eliminated parts of the program. You are asked to tell the leader what you found helpful and anything you would add to or delete from the program.

Finally, I am delighted that you have used this program as a small tool in implementing the marriage you and your spouse want. You have learned that marriage is a continuing process that has its strengths and weaknesses, its good and bad times. Hopefully, you have learned some tools that will assist you in capitalizing on your strengths.
Requirements for Rooms and Materials

I. General Meeting Room (at least 20' by 15')

The room should be quiet with comfortable chairs, couches, or floor pillows, properly ventilated and with sufficient light. The view from the room should not include people walking by or anything else that would distract the general attention of the group. Restrooms should be nearby. Coffee and minimal refreshments should be available. The session should take place somewhere near a park of area for walking as a part of the program.

II. General Materials

1. Newsprint and magic marker
2. Overhead projector with wax pencil
3. Member's manuals for each participant
4. Pencils for the members
5. Leader's manual
6. Chalk and chalkboard

III. Group Size

The program is designed for groups of three couples (participants) to ten couples (20 participants), depending upon the degree and extent of marriage dysfunction. If used as an outpatient program of a mental health clinic, three to four couples is a sufficient number, even with a co-leader. However, as a program of basically healthy marriages, nine to ten couples can be
included depending upon the leader's clinical experience and sufficient experience with the model. Be aware that it is potentially possible for a member to have a regression during the sessions and large numbers make it difficult to deal with such a potential situation. For the first few times, even with highly trained professional leadership, four to five couples is optimal size.
Selection of the Group Members

I. Indication of group availability

As a clinician, you may be aware of the needs within a community. Community agencies, schools, and churches, through a questionnaire, may give an idea of the number of interested persons. An article in the local newspaper, professional organization newsletters, and addresses before local clubs about marriage will give sufficient coverage to the community.

In the publicity, emphasis should be placed upon communication skills, knowledge, and positive aspects of the experience rather than discussion of actual therapy. Also, the preventative aspects of the program for better marriage fulfillment should be included. Spouses, particularly the male spouses, generally want to know the intent of the program. Be most supportive, as a discussion of marriage is anxiety-producing in general.

II. Selection Testing

Initially, the MARRIAGE INVENTORY should be sent to those desiring to become members of the group. Depending upon their responsiveness to the inventory, you can select about 140% of the group size that you desire; i.e. if ten couples are desired, select fourteen couples. Then, an hour and one-half of testing period should be
arranged, during which the Leary Interpersonal Check List will be administered along with the Wittrup Marriage Role Checklist. After scoring, those falling into personality disorder ranges on the test, including potential acting-out, should be eliminated from the group and referred to traditional therapy in the community. In no way should this program take the place of traditional therapy for dysfunctional marriages, particularly for those referred to above. Particular notice should be given to the sadistic-masochistic profiles and other indicators of personality disorders.

III. Pre-Session Interview

After the testing and scoring, those couples selected are to be called in for a short interview of 45 minutes. The interview should give the leader the opportunity to check out any ambiguity in the testing or inventories, and begin a relationship with the couples themselves. Also, the leader can interpret the sessions to the couple as to expectations and procedures. During much of the interview, the leader must use the clinical assessment techniques of a psychological-social history, but not necessarily the formal question and answer format. As a leader, you should feel confident that the group will benefit from the experience and will not act-out within the group structure.
Notes should be transcribed on the file used for each couple, including the testing and inventory results. In this way, the couple is viewed individually and within accepted clinical practices concerning proper case records. At the end of the interview, you should indicate whether or not the couple is accepted into the group and the reasons given for either acceptance or referral.

IV. Post-Session Interview

The retesting can be done at the conclusion of the sessions or during a pre-arranged period of time within seven days after conclusion. You will normally find the group most cooperative at the end of the sessions and more available for testing. Additional testing time can be done either during clinic time with separate appointments or during an extended time period during the last session.

Based on the testing and particularly the areas of change, the results should be verbally given back to the couple within a two-week period of time during conjoint post-interview. Test results should be given as an interpretation, not as specific scores or according to the group mean. Results should be reported according to the degree of changes seen and interpreted positively, with recommendations. The couple should be told the leader’s observations and then ask the couple for their
observations. If there are any problems that arise during the couple's interview, either the couple should be referred or asked to come back for some additional individual sessions. Also, the couple should be encouraged to use the exercises and refer back to the skills if they find occasional difficulty in communication.

As with all therapy, the couple should be told that there will be occasional relapses of behavior and concern over the marriage, especially when compared during a momentary crisis to the high ego-functioning of the group. Assure the couple that it is normal that each couple will have these kinds of momentary experience, but not to despair. Indicate that the skills will assist them and also that traditional therapy is available if difficult problems arise in the future. With that, the couple's post-group interview should be concluded.

V. Post-Group Staffing

After the post-group testing and interviewing is completed, an assessment of the group should be made by the leader and co-leader. Decisions as to potential inclusions and exclusions should be made at this time, and also, the final report on the couple should be made. This will conclude the case study and also a standard report to be sent to psychologists, psychiatrists, social workers, counselors if requested, for their use.
in their therapy. Closing reports done immediately after conclusion tend to be more reliable and consistent, and they would serve as a good basis for continued counseling sessions, if requested.
During the initial stages of this program, you should be aware of the critical nature of your role as leader. This program is "strong leader" and requires clinical skills with empathy and understanding demonstrated at all times. Both husband and wife, but particularly husbands, are deeply suspicious initially of assistance in terms of their marriage. The husbands' informal indoctrination up to this time has been that the state of strength of marriage is their "private right and privilege." Their presence in the group is evidence of both mutual encouragement and real risk-taking on their part to permit an outsider the privilege of examining their marriage, and that strength should be supported and accepted.

It is often very beneficial to have coffee, low lights, and comfortable couches and chairs provided for participant use. As they arrive for the meeting, take a little time to reintroduce yourself or introduce yourself, on an individual basis. See to it that special needs are attended to initially, as an indicator of positive acceptance. Although you may have an aversion normally to name tags, there seems to be no substitute. For at least the first four sessions, have the name tags made up with first and last name only, with no formal
titles. The co-leader can often assist in getting this clerical work completed during the initial stages, leaving the leader time to wander around the room conducting rather informal conversation. As with all forms of relaxed therapy, the availability of coffee and tea gives a warm, human touch for the members attending, especially during the critical first session.

Chairs should be comfortable and padded. Couches are also a good choice. Arrange the chairs or couches in a circle. The leader should provide the initial beginning by taking his or her seat and asking the members to take theirs. The co-leader should sit always on the opposite side of the circle from the leader. This procedure provides complete visual coverage of the group as well as efficient means for the leaders to communicate non-verbally with each other. There will be numerous times when the leaders will need to communicate without disrupting the group proceedings. Also, when one leader is involved in the communication in one place in the group, the other leader should frequently survey the group and pick up both the verbal and non-verbal communications of others in the group. The other member's reactions are reliable forms of feedback and a basis for group assessment.

Initially, you will be expected to give a short introduction to marriage enrichment as it pertains to
your particular institutional setting. Your attachment to various previous groups should be related to the group meetings. Often, members have had some awareness of group procedures, particularly marriage groups, through various forms of the mass media that occasionally tend to distort the group process. An introduction that will relax the members and correct these distortions is highly desirable. Five to six minutes is sufficient for the introduction.

Next, based on your introduction, ask the members to share with the group what they were expecting to get from the group meetings and more specifically some form of contracting. Most groups are spontaneous but occasionally a few examples of expectations will assist them. Examples would include: developing new forms of intimacy, better communication skills, regaining the zest of earlier marriage years, and any others that you may want to add. It is important that you assist the members in specifics because contracting needs to be specific and not general. As a leader, you need to respond by either accepting or modifying expectations into obtainable goals for the group experience. The co-leader should write down these goals as agreed upon by the group. At the end of the exercise, the group is asked to respond to these goals and a kind of voting should proceed "How many see themselves desiring point no. 5 as one of their
goals?" with the co-leader writing down the number of votes for each. By the end of this short "contracting period," the group is aware of the direction of the group in realistic goal terms.

The next step is to provide an opportunity for the couple, as a unit, to decide upon their contract. Each couple is asked (in the manual) to write down the strengths in their marriage. This process is to be done individually (as husband and wife). When finished, each individual is asked to turn that page over and write down the weaknesses as each sees the marriage. Men, more than women, according to this author's experience, are reluctant to consider these facets of their marriage in a group setting. Remind them that the weaknesses will not be read for the class, but are for their own use. General areas such as communication, sexual needs, etc. need to be set in specific terms that each spouse will understand. For example, statements like "Our communication is not good" are poorly stated and do not really state the problem, which may be "When my husband comes home from work and I ask about his day, he refuses to talk about the job and this makes me angry." The latter statement provides clarity and direction, while the former is general and non-directive.

Each couple is then asked to go to some part of the room to discuss these lists. As the leader, direct at
least one couple to a place in the room or retreat center
where there is sufficient privacy as an example for the
other couples to follow. During this time, couples are
asked to share the lists and respond to each other by
deciding on three weaknesses that they would like to
have modified or reversed during these sessions. Next,
they are asked to state in writing again, six strengths
they would like to affirm during the sessions. Your job
as leader is to model the behavior during the anxiety-
producing time for the participants. Normally, one or
two couples will try to use some form of humor or even
some aggression-reactions in order to deal with their
anxiety and that's permissible. However, in extreme
cases, the leader may need to assert his/her role by
reminding them that the exercise is basic to the sessions.
This should be done in a low-key response similar to
the response that you might give during any other therapy
situation. Be careful not to put the group members on
the defensive during the highly sensitive first session.

Occasionally, one or two couples will ask for initial
assistance with this exercise. This may or may not be a
resistance to the experience and based upon your profes-
sional experience, handle it with firm but compassionate
responses. For example, a wife may indicate that she
knows that there is something about their relationship
with their in-laws that is not satisfying, but is unsure
as to the exact problem. Ask the couple to specify when a problem seems most apparent and when it is least apparent. Ask them to remember when the problem last occurred and what did they do about it. Based on that information, they should be able to develop some statement of the problem. Unless the couple is lacking in intellectual process thinking, most couples can carry out this exercise. If the couple continues to resist and refuses to consider the problem areas, a re-evaluation of their presence in the group is in order. Refusal is often the first sign of passive resistance to the group process that could "short-circuit" the experience. You, as leader, need to determine the ramifications as soon as possible.

"Fish-bowling" (as described in the manual) is a technique used recently in numerous groups and you probably have had much experience with it. The idea of the "I-You" dialogue used in "fish-bowling" is to have each person take responsibility only for his/her own observations. In dysfunctional marriages, one of the clearest signs of communication breakdown is the spokesman for the couple who often distorts or contrives the opinion of the other. (This behavior is perhaps even encouraged by the other spouse.) This exercise specifically has as its intention the modification of the couple's communication into responsible dialogue.
Always seat yourself behind the person tending to use various forms of passive-aggressive behavior. Shostrum's text MAN THE MANIPULATOR\(^1\) specifies this type of person as "the weakling, the clinging vine, the nice guy, and the protector." After a few groups, you will normally pick up these persons and their passive-aggression during the initial screening interview. The weakling and the clinging vine person tends to be the wife, in that she has been taught to manipulate by these forms of behavior. But the nice guy and protector types are evenly divided among men and women, and they tend to be seen as nice persons until the group gets underway. Their forms for resistance become more and more apparent in their involvement in holding back the group from conflict-oriented subjects. They will sometimes refuse to recognize anything wrong with their marriages and always attempt to "cover" supposedly for the other spouse or even for another couple in the group. Again, unless your intervention works soon in the group experience (within three to four sessions), you should evaluate with the co-leader, and later with the couple, if they should continue in the group.

The exercise concerning the filter system is best illustrated by the member's manual. Your own experience

\(^1\)Shostrum, *Man the Manipulator*, p. 37.
will probably be a reference for similar kinds of distortion with which the group can identify, so don't hesitate to include them at this point. Explain to the group fully, that arguments often occur because of distorted messages that bring a ventilation of old anger and bitterness. The person cannot be allowed to "bring emotional baggage from old fights and disappointments" into the present circumstance. Perhaps you will feel free to ask for some examples of similar experiences from the couples themselves, but don't allow it be become merely story-telling time for the couples. Limit the experience-telling to two members of the entire group.

The next exercise concerns a means whereby similar distortions can be made minimal. Before permitting the couples to begin, demonstrate this exercise with the co-leader concerning some fictional concern. Clarify pertinent questions concerning the exercise but move immediately into the exercise itself. By this time, you will be aware of at least one couple that feels free to begin this exercise without difficulty. Request that they be the first couple to begin, thus lessening the anxiety for the remaining members of the group. Have the couple complete the check-out procedure before beginning with their response, something they will attempt to minimize. Until the rules of the procedure are carried out, you, as the leader, will be expected to carry out
the role of facilitator more directly than with the other couples. After the couple is finished (limit it to three to four minutes), request that the other couples critique the exchange both critically and with support. The group serves at this point a facilitator-function by giving verbal feedback about what they saw going on during the exchange. Don't permit generalizations like "they sounded fine" or "he didn't say much." Request clarification in terms of specifics and examples. The co-leader should write down in his own notebook the impressions of the group for a later staffing meeting.

By the end of the initial session, the group will be tired from the exercises and from the anxiety produced from the new experience. Take some time to give your general impressions of how you saw the group move from a collection of individuals to a functioning group. Share with them that their feeling of anxiety and concern is common with similar groups and as the group progresses, the anxiety will become more manageable. In the same way, the group should be asked about their impressions of the first night together. Permit three to four minutes of sharing and then remind them of their homework for the next time.

The homework is a scheduling of time for communication and sharing. By this time, most of the group members will be anxious to try out their new skills and to implement them in the five minute, or more, time together.
Emphasize that this time is an opportunity to learn the practical uses of communication skills. Then, dismiss the group.

Often, the time immediately after the group is dismissed is a good time to observe the couples. Notice whether couples rush off quickly or seek to converse with others. Do they attempt to probe further the points of the evening or do they attempt to become a second "co-therapist?" You must record your impressions mentally and then write these down soon after everyone leaves. Impressions are important in "reading" the group itself and in creating a system of relating to the couples in your own professional role.

A staffing on the group immediately after with the co-therapist will provide an excellent time to share impressions and a "reading" on the direction of each individual couple. Put these statements in the case files along with any reminders for the next group session. A staffing of one-half hour is an absolute necessity for this marriage enrichment, especially for the initial use of the model. Feel free to discuss the positive and negative reactions that you and the co-leader have had with the model. These comments will prove valuable in future modifications.
Session II

The beginning of this session should begin with the same procedures as the last meeting with name tags, coffee, and a general relaxed atmosphere. If your couples are similar to past groups conducted by this author, at least one couple will want to share some unique experience with you personally. Before they begin their story, ask if they would like to share the experience with the group itself. If so, it becomes a unifying time for the group to remind them of the intent and direction of the group. If not, an experience of a very personal nature shared individually will bind that couple to you as a leader. In addition, the reaction of the group in the sharing will assist you in amending the program in terms of additional input. For example, embarrassment of a couple listening to a story about a renewed love may indicate some fear or basic concern over attaining that goal.

After a normal opening, ask if there is anything that anyone would like to share for the benefit of the group. Someone might have read or heard a discussion of marriage which may create real group awareness and should be encouraged. Be aware of the second "co-therapist" or the person who may challenge the underlying ideas of marriage enrichment. If this happens, follow the suggestions in session one for resistant members.
Session II deals with messages described as explicit verbal, explicit non-verbal, implicit verbal, and implicit non-verbal. Draw upon your experience to illustrate situations where these messages are transmitted, and how easily the implicit messages are distorted. Permit the group to share, for a short time, their impressions of these basic communication concepts, but limit the introduction to five minutes. With either an overhead, blackboard, or newsprint, put the four concepts before the group for general viewing and review.

At this point, have the couples move their chairs to a position facing each other. Using the member's manual, signal them to proceed through the exercise. Limit each point of discussion to three minutes or less according to your reading of the group and whether the group has obtained maximum use of the exercise. Notice the behavior of the group by moving around among the couples and perhaps assisting the couples to complete each point according to your specific directions. Be sure that each couple understands and demonstrates the four levels of communication.

This time in the session is a proper time to include some input concerning the importance of learning to read the various levels of communication, especially those not consciously picked up by either spouse. Invite comments from the members concerning the kinds of reactions
they had to the communication levels. What is desired here is a free exchange of ideas until the cognitive process of each individual begins to process the dynamics of messages he or she is giving or receiving. You are aware that many messages don't exist. Married people, however, become so used to reading or misreading messages that they rarely bother to check out the true meaning.

Consider for the moment, the husband who felt that going to a service club dinner once a week and taking an active interest in the club's activity would lead to better status and therefore a higher income for the family. This was the message he was trying to give, even though he was fatigued and irritable most of the time. His wife interpreted his behavior as choosing the club over the family and her. Therefore, she refused to attend dinner parties or general mixed gatherings. To the husband, her refusal was seen as failure to support him in his efforts to raise family status.

Therefore, the over-riding intent of this exercise is for the couple to begin processing hidden messages and to bring them into explicit verbal exchanges. The encoding-decoding process of these messages will need your assistance in developing confidence with the model. An option here will be to ask the individuals to remember what there was about the "courting" period that made them attracted to their spouse. As the leader, it may be
necessary to assist in their encoding and decoding, especially with the labels. For example, "He was just so kind in the way he talked" (wife), which you could interpret, "He spoke in such a way that you felt secure and worthwhile." She could continue, "Maybe it was the way he looked just at me and into my eyes when he talked." You can explain that the message included, "He spoke (explicit verbal) in such a way that you felt secure and worthwhile (implicit verbal); maybe it was the way he looked just at me (explicit verbal) and into my eyes (implicit non-verbal) when he talked." One of the ways to make this expressive is to ask if he continued to talk and act in this way. The discussion that follows will facilitate the understanding of how these messages can be so very important. One caution, though, be aware of the occasional desire of an individual member to make the group a kind of "jury" for her or his charges against the other. Such a format would be destructive.

As is pointed out in the member's manual, the goal of the MEG is to learn the mechanisms of love that operate inter-dependently and to become determined to exercise the facilitating mechanisms to the best outcome possible. As you use the Marriage Inventory, you will see that a majority of couples still tend to use infantile forms of relating to each other. This way of relating operates best when no conflict exists. But
when special problems occur such as a job change or a defiant child in the family, the infantile forms of relationship used previously cannot cope. It would be as though there were suddenly a huge surge in an electrical current on a circuit built only for an electrical charge as carried in the pre-1920's. There is not a way possible for the circuit, or for the marriage, to deal with the heavy overload.

It is possible for the leader to introduce at this time, the cycle of self-defeating behavior that is so obvious to you as the leader of this group. If the group shows interest at this point, use the following exercise to demonstrate the form.

When you become heavily invested with angry feelings, you seek a way to let the person, in this case your spouse, know that you are angry. Not being capable of simply stating the feeling, you develop a mechanism from your experience that you know will get his/her attention. For example, you may deliberately overeat or overdrink when you know it is not appropriate. You may invite friends over, even though your spouse wants some time for himself/herself during that same time. You have the spouse handle an upset that you were involved in with the children because of the response you know you will get. You deliberately stay at work later than necessary to get his/her attention. You accidentally forget the anniversary or special dinner as an attempt to get
that angry feeling out. From your parents, friends, and your previous experiences in family life, you observe the behavior that really gets the results that you want. Therefore, the best possible outlet is developed and used again and again to bring the outcome. Some authors consider these behaviors as various forms of manipulation. Shostrum's MAN THE MANIPULATOR divides these tendencies into two divisions with four subdivisions. The one division, the "top-dog" is divided into (1) judgmental, (2) hostile, (3) calculating, (4) dominating; and "under-dog" is divided into (1) weak, (2) clinging, (3) over-friendly, and (4) over-responsible. Each person carries on behavior that can be interpreted in these categories; couples tend to operate their manipulations in a vicious, never-ending cycle. The marriage counselor finds difficulty in assisting the marriage partners to become more direct in their relationship, instead of relying upon manipulation to gain power in the marriage.

You know that the means by which self-defeating manipulations can be reduced in use is by developing more explicit-verbal communication patterns. For example, one couple came to a marriage counselor just after filing their papers for a divorce. As the sessions progressed, it turned out that they were resisting direct talk in preference to a form of manipulation; in this case, the classic of the husband who stays late at the office and the wife who flirts at parties. The cycle
of self-defeating behavior continued until it had become a contest of wills as to "who would win the manipulation game." After three months of intensive therapy and two months of intensive re-education, they began to enjoy the harvest of their marriage for the first time. In their search for intimacy, for love and for support, they had withdrawn those very things from their spouse and began a battle of wills. You may have similar couples in your group.

Ending the session will be difficult if the group becomes excited about sharing their responses and reactions. You will need to implement the design for the homework (setting aside time to talk each day) with some minimal sharing. Terminate the group before the group satisfies its need to share. What we do not want here is for the group to become the major focal point for communication. Rather, it should be a beginning for communication to develop for the couple themselves. Encourage the couples to try a variety of times and places for specific communication, but emphasize the need for uninterrupted or unhurried times that are set aside regularly for their use.

Take about five minutes and ask the group to review their experience during that particular night. Questions for clarification on the homework are appropriate, but going back and starting to re-work the program
probably would disrupt proper termination. When the short review is complete, give a short statement concerning how you see the group working and pointing to the next session.

When the group has ended the session, again observe whether there are any couples that rush out the door, move into small groups, plan to gather for a short coffee or nightcap, or want their opinions expressed to either you or the co-leader. All of these observations are important in evaluating the degree of anxiety and progress of the group.
Session III

Briefly, at the beginning of the session, ask the group how the homework progressed. Limit the length of the discussion, but encourage each couple to express the degree of effectiveness in setting up the special time for creative conversation. Observe any indication of resistance; for example, forgetting, not enough time, or feeling funny. As a leader, you need to insist that for maximum outcome from the marriage enrichment experience, they must attempt the homework assignment.

This session is based on the "bad-self messages" that are a predominate part of each person's growing up. What we are dealing with is professionally known as the neurotic lifestyle seen by Adler. Each person is given a bad message, such as "You have a nice personality but your face is ugly." Operating out of this "perception," the person compensates by the overuse of another adapting mechanism, such as "high grades or athletics." Life becomes a cycle of an achieving image that overrides the poor self-image; therefore, a life of mere compensation. What is disastrous is not necessarily the compensation, but the underlying fear of the "poor self-image."

What this session provides is an opportunity to gain a deeper awareness of the strengths that each person has as his/her own personality. The short story
that is included in the member's manual highlights fear that can distort interpersonal relationships. Point out to the group members that if they have had any recent experiences along the same line, this would be an appropriate time to begin sharing those perceptions. Although these experiences will sound in some ways like mere story-telling, they are in many ways like the ongoing support therapy that is a part of traditional one-to-one psycho-therapy and appropriate to this group experience. The person often doesn't need advice but a sense, as one patient said, "that another person hears and understands my heartbeat." That knowledge itself is reassuring to the person reaching out for human concern and understanding.

Take time for the group to share in the story itself and the stories of the group. As a group, attempt to discover the following:

1. What is it that I am most afraid of in this case?
2. What do I attempt to do when in danger?
3. What basic fear is my constant companion during the day?
4. How do I try to hide this from other people?
5. How can I eliminate self-defeating behavior?

If the group tends to be quiet and not spontaneous, break the group into two mixed groups, with spouses assigned to
different groups. The co-leader and leader would facilitate the group process. Appoint a group secretary to report back to the group. As instructed in the member's manual, have each couple sit in the middle of the group, one couple at a time. Taking turns, each spouse is to give a positive trait that each sees in the other. Initially, you may have to translate and reinterpret the first few statements; for example, "By good mother, you mean good human being that our children see as caring." Don't hesitate to model the traits that you want in specific terms rather than neutral, general traits. When the couple exhausts the traits, ask the group to feed in additional traits that each sees in the other. This is an old group technique of "strength bombardment," but using the dyad as the focal point. After the couple has received the group awareness reports, perhaps you as the leader would like to share your perceptions. This role will be up to you personally. After the entire group is involved in this process, have the group discuss the experience for a moment. What did it feel like to hear the positive feedback both from the spouse and from the group? Respond particularly to expressions of joy and support from the group. The reaction will be much like an individual in traditional psychotherapy who senses a new direction or grip on life after a positive interpretation.
The homework assignment is really a continuation of gaining power over the neurotic lifestyles and non-productive behavior. Each person in the group carries with him fantasies about how much someone else lives more than they. Opportunities to share these with the spouse not only relieve the fantasy but also relieve the person from the responsibility to live according to that fantasy. Literally, it gives the person the opportunity to state, "I give myself permission to live." The group will be unable to state this directly, but the freedom to become is the direction of the homework. In itself, the homework is not necessarily "change-producing," but developing the awareness that the person can initiate and control his/her life.
Session IV

At the beginning of the session, ask the group for the results of the homework assignment. One of the best facilitating mechanisms is using a magic marker on newsprint to list the fantasies presented by the group in the session. Then, ask how the group felt about sharing the fantasy with the spouse, and if that sharing did anything to facilitate a sense of freedom. Spend some time reviewing the progress of the group up to this point, particularly a statement about each session as it applies to the final outcome. Be aware of the need to give positive feedback to the group and give a sense of cohesiveness at this particular time. Also, acknowledge the acceptance of those fantasies within the range of normalcy.

This session deals with role definition and value clarification. Using the model in the first paragraph of section IV in the member's manual, have the group quickly go over an accumulation of roles that a person might have. The intent is to clarify roles found in modern lifestyles. The "Who am I?" is a modern search arising from the ambiguity of role and role choices. The conflictual nature of those choices becomes most apparent when the two roles begin to conflict for time or attention.
After the group has read the exercise concerning the different roles each person has, move on to the role divisions. Instruct each participant to list his/her own ten top roles. Number 1 is to be the most important role and number 10 the least important. After that section is completed, have them fill in the area with a statement concerning the major conflict they have in that specific role. Occasionally, there will be a member who doesn't see himself or herself carrying out roles. Attempt to assist that kind of person by asking what sorts of things they do during the week and then translate the activities into the specific roles; but don't be tempted to do the exercise for them, for this is a very personal and private experience.

Using roles 1 and 10 and their conflicts, have the group deal with solutions to those conflicts. What is desired here is not clear-cut answers but the modeling of how the conflicts can be handled in an adult, constructive way. There may not be a solution, but rather an acceptance of a priority of roles, especially concerning the allocation of time and energy. This is especially helpful when it includes the spouse, who can hear and understand the conflict. Don't permit spouses to interfere with each other's role or value selection.
Value and role clarification involves conflict, usually associated with emotionally invested experiences. The response of people asked to clarify roles and values is often similar to forced answer personality assessment or projective testing, in that anxiety becomes great and fear of disclosure heightened. The values that are to be included in the list of ten that tend to be the static values that exist now in the person. Assist them in filling out the list if they show great difficulty, but again, don't be manipulated into filling out the list. Examples, such as community respect, being a good mother, having a nice home, respect by peers, etc. would give all the help they need.

The homework in this session is the continuation of the in-class work, and therefore, be sure each couple is aware of the requirements before leaving. Both point one and two are to be filled out when they are home. Unless unusual circumstances interrupt, the group should be terminated after a brief review of the evening's activities and program. Be sure that they are aware of the roles and completely filled out the roles and role conflicts before leaving. Get a reaction from the group concerning the experience and make observations of the group and individuals.

Check with the co-leader after the group to see if there were any specific problems that he/she observed,
and whether the group is gaining the anticipated experience in the group. It may be necessary to modify and amend the sessions as they progress.
Session V

As you will notice from the member's manual, this is a continuation of Session IV. Before beginning this session, construct for a moment, the basic format of the last session, including the role definitions and value definitions. Ask if there were specific difficulties. If so, the group should take time to discuss these. Answering questions will allow the group to move into the final assessment of the roles and values. Twenty minutes is sufficient for the summation with questions and answers.

The initial story is one that is general enough to permit understanding by the couples. If they have not read the story, take a few minutes to read and digest the story. Make sure that the idea behind the story is clear to the group before moving on to the next step.

Have the couples move into dyads for a twenty-minute period to discuss the next two points. One of the best ways to lead into this experience is to explain that individuals often assume that the roles that they have decided upon are agreeable with those of their spouse. Continue by indicating that marital conflict, including such minute details as cleaning the house or making social plans, is because of a basic ambiguity concerning the marital and individual roles. Interpret that the exercise will provide an opportunity to share
these differences and come to some kind of agreement. With a short introduction, ask them to break into their dyads.

After the dyads have completed their experience, have them return to the group itself and with you as moderator, conduct an informal survey of the roles that spouses see in others. Also, survey the group as to the method of agreement and means of reaching that agreement. Have your co-leader keep scrupulous notes during this period for the later post-group interview.

Take a short period of time to input that there are no right or wrong answers to these roles, but rather, roles specifically comfortable for each couple. An analogy is that each of us holds a job or a responsibility that another member in the group would not especially care to hold because of the specific differences in outlook and desires. If time permits, let the group share their perceptions of this feeling. One discussion starter is "How do your role perceptions differ from those of your parents?" With that question, your basic problem is to terminate discussion.

The MARITAL RESPONSIBILITY INVENTORY will produce a specific termination of the last session and the first part of this session. Have the group fill out this INVENTORY. After all have completed the form, each dyad is responsible for working out an operational
program for the marriage. If a couple specifically asks what to do if they disagree and can't come to an agreement, ask them to use the disagreement as a basis for the homework for the next session. Don't become involved as the mediator or judge in their decisions.

Homework should be becoming more and more consistent with the final outcome of the group experience— independence in the decision-making. The underlying assumption of the group experience concerning the whole realm of role definition to Marital Responsibility Inventory is that couples have more time for intimate joy when the minute details are settled.
Session VI

As you notice from reading this section, the next area is concerned with human sexuality and sexual information. Couples have tended to place the responsibility for "sexual knowledge and teaching" traditionally with the male, who, more often than not, is as misinformed as the female. In some sectors this may not be true, particularly with those individuals attending classes and seminars on human sexuality. Organizations like Planned Parenthood and various public health programs are doing a superb job of giving this kind of information to the public. But the population that is married is often the last group to benefit from the newly released forms of information. It is for this purpose, and the continuation of helping with role definition, that this section is included.

Before the group begins, I would suggest that you use the drawings in the book and either make large drawings on poster boards or use an overhead viewer. Specifically use the names that are indicated in the text itself and become very familiar with the terminology used in sexuality studies. As the group convenes, have the members review with you the basic underlying information in the text. Then open the forum for a discussion of the concerns about sexuality.
Even though the information is presented in the text, go over the anatomy information with the entire group. The combination of reading and hearing will stabilize the information in their thinking. Then, the discussion can begin with shared ideas. You are free to make use of any teaching aids that you, as the leader, desire. If a nearby science department or public health clinic has plastic models of the genital area for demonstration, use them if desired.

The discussion will probably open with discussion of the myths held by the individuals. The more inhibited persons will perhaps be unable to share, but please use this opportunity to open up the discussion. Have the groups split into females and males to facilitate openness of discussion. Before they begin, have paper, pencil, and a secretary-reporter appointed in each group. As the member's manual indicates, they are to ask who taught them various myths about sex and what was taught. Names are not necessary, but rather references such as priest, physician, teacher, mother, buddy, etc. In addition, the group is asked to write down and agree to four questions to ask the leader when the group reunites.

When the group reassembles, you, as the leader, are to write down the myths and from whom these myths were learned. Permit the group to use a kind of tension release (humor, jokes, etc.) to relieve the very normal
tension associated with sex information. Then, have the reporter ask the four questions and answer them to the best of your ability. If there are questions that you cannot answer, feel free to indicate that and then contact a physician and report back at the beginning of the next session. Your willingness to be open and sharing will be appreciated by the group and facilitate the final outcome.

The homework assignments are the most demanding of the entire series of sessions. Read the instructions to the group and ask them to use the experience to the best of their ability. You may need to explain to the group that the idea behind the homework is to provide an opportunity to implement and use the last six sessions totally. They are to be the final judge if they feel the request is too out of line with their value system and to modify according to those values. The most important point in the entire homework assignment is that they are to become sexually aroused, but not to act upon that arousal (sexual intercourse) until they cannot postpone gratification any longer. It is possible to complete this assignment at home, using the home bedroom. They are to have breakfast alone, as the meal together. What is important is to be free from imposition by children and outside demands.
Normally, the session arouses the greatest degree of anxiety of any of the sessions. You are dealing with persons who have trained themselves to think sexually under certain kinds of conditions and not under such optimal conditions as these. If couples hesitate to leave under the pretext of needing some information, pause to make a joke, or hurry out, consider the degree of anxiety as normal and operate as you would in traditional psychotherapy. Beware of the temptation to become merely an information giver or judge on sexual matters.

Again, notice the non-verbal responses of the couples as they leave the room. This may be one time when the couple may need some specific clarification on the homework.
Session VII

The tendency of beginning this session after session VI is that there is a greater degree of anxiety, and even occasional hostility, than in any other session. You will need to use your own counseling skill in assuring the couple or individual that the input is difficult and occasionally upsetting to the average person. Unless there are obvious amounts of hostility, make an immediate attempt to begin the group by stating that you are aware how difficult the last session was for the average couple because of the strict teachings and strict roles of the past. Indicate that the session will permit greater understanding as they occasionally use the homework to enhance their experience.

One of the influences that makes a great difference in the final outcome of marriage for couples is the relationship each one has with the in-laws. Some in your group live under some form of extended family described in the member's manual and others align themselves in some degree or another in the nuclear family. What is important for the group to understand thus far is that there is not a right or wrong way, but rather an individual response to the in-laws.

Have the group read the member's manual and using the terms nuclear family and extended family, satisfy
in your mind that the group has an operational definition of these terms. Explain that it is important that both husband and wife agree on the relationship with the in-laws to the extent that they wish that relationship to be implemented. Again, there are no right or wrong positions, but rather agree on comfortable positions for each couple based upon individual and dyad needs.

You may or may not agree with the assumption of this session. It is the underlying assumption that it is not the degree of involvement that is important, but rather that the dyad develop some minimal, at best, relationship with the in-laws. As the leader, you should operate with this assumption to carry on the experience as set up in the member's manual. Any deviation requires an understanding of the change in the eventual outcome of the group as compared to the original intent.

In summation, give an overview of the information in the session dealing with the kinds of relationships. Then, take 40 minutes and discuss the kind of relationship the couples now have with the in-laws and when they made the agreement. You must operate as the facilitator during this session due to the underlying emotional trauma normally associated with revealing intimate details about parents and parental authority. Give sufficient support and understanding as you deem appropriate.
Limit caustic remarks between spouses unless there is a need for the positive ventilation as seen by the leader. Each individual is requested to respond to avoid a "spouse assumption," which in itself may be revealing.

The group is now asked to draw up a list of twenty potential solutions concerning the in-laws. Names and purpose will need some clarification by the leader. Using either a magic marker or an overhead projector, write these so the entire group can view and consider the choices.

When that portion is concluded, have the group disperse into the individual dyads to fill out the questionnaire concerning the in-laws. Be aware of the need to intervene with a couple having real problems with the questionnaire if any verbal abuse or crying is shown. Use your normal therapeutic skills in conducting that intervention if necessary.

In the homework section, we are attempting to review and refresh the memories of the group members concerning the past seven sessions, particularly the kinds of experiences they have had. In that review, it is the intention that they set some specific goals for the dyad for the next two years and also some long-range goal-setting. The assumption here is that the rut of modern live is paved on forgotten dreams or lack of basic goals. You may need to assist the group by giving the following examples:
Short-range Goals:

1. We will go back to school and learn German.
2. I will learn to swim this next summer.
3. Instead of an expensive vacation next summer, we will rent a cottage for the family for two weeks and really get acquainted.
4. I will look into a job possibility with that new firm.

Long-range Goals:

1. In twenty years, I want to retire from the business and start a seasonal business in the country.
2. In twenty years, I want to know the children have enjoyed their time with us and have lives of their own.
3. In twenty years, I want to return to school and receive my degree in horticulture.
By this session, you have grown rather close and fond of the group itself. In many ways, the group will want to continue the experiences into additional sessions. That decision will be ultimately up to you as a person, but do it with the total group needs in mind. Your contract is with eight sessions and should be maintained in the group unless the total group decides differently.

The series of expressions that are initiated by you require a bell for attention and also your keen observation. Watch the couples closely for the kind of sensitive response that you are seeking. Do it in such a way that it doesn't terminate the experience too early for the couples. Get an emotional reading of the couples, and on that basis, decide when to move on to the next experience. Sufficient time is provided in this session for an extended period during these initial exercises.

Next, the group is going to re-assemble with you serving as a facilitator for the next experience. The strength bombardment exercise is to be done in rotation around the group starting with the individual designated by you, as leader. Ask the group to give the positive traits as well as the kind of good feelings they have toward the individual. Only after the entire group has been involved can the individual respond to the expressions.
Even though this is an enjoyable experience, there will be attempts to interfere with the experience itself with a few jokes. Insist that the person respond in the spirit of the expressions of the group with full attention given to "how those good expressions feel now." You will notice the high level of group consciousness as well as individual consciousness.

When each member has had his/her turn, have the group "process" the idea of receiving the positive feedback. Have the group contrast these feelings to negative feedback that is so prominent in the world around them since their infancy. Then, ask the group if the positive feedback gives a greater readiness for making decisions and living life to fulfillment. Encourage the group to share in gaining control over their lives through positive feedback.

Then, as leader, you should remind the group that this kind of feedback procedure is a pattern that, if continued, can lead to new directions and attitudes in their lives. Indicate that employees, children, fellow workers, and friends need these same kinds of positive feedback. It is important that the "passing it on" be implemented as a pattern to gain the greatest potential from the positive feedback system.

A walk with the spouse alone to discuss the "way love is shown" is a natural continuation of the process.
of positive feedback. The intent of this exercise is not only the essential time alone, but also learning to give each other signals of love and support as a dyad. The couples are encouraged to systematically use the communication system to find the kind of signals that would be essentially efficient and natural for each couple. An example is "today has been a 'down day,' I need you to help me make it an 'up day.'" Suggest that the couples take a specified amount of time to take the walk that provides for spontaneous remarks.

When the group reconvenes, have the couples share with you, as facilitator, the results of the process and the goals reached. Have your co-leader keep detailed notes of this section for the post-sessions interview. If a reason for open sharing needs to be indicated, tell the group that the couples can learn from each other. Summarize the points as the leader or have the co-leader read back the list for maximum input.

The MARRIAGE CONTRACT is an attempt to put on paper what has been the basic intent of the exercises during the eight sessions. Have the group disband and fill out the contract. As the leader, don't read the contract, but sign the contract as the witness to the completed exercise, the culmination of the eight sessions together.

You may find that a short group review of the MARRIAGE ENRICHMENT GROUP will assist you in either adding or deleting material for future groups. Have the group
tell you what they found helpful and what they found as a hindrance to the objectives of marriage enrichment. Have your co-leader write down these points for "staffing" after this session is complete.

Finally, summarize the experience with an indication that the program is a skill-building program and not a final product for their marriage. Encourage them, as couples, to use the skills for the betterment of their marriage and of their own personal lives.

End the group on a positive note and conclude. Permit some lingering and sharing as a part of any group experience.
APPENDIX D

LEARY INTERPERSONAL CHECK LIST

WITTRUP MARRIAGE INVENTORY
LEARY INTERPERSONAL CHECK LIST

Name __________________________________________

DIRECTIONS: This booklet contains a list of descriptive words and phrases which you will use in describing yourself and members of your family or members of your group. The test administrator will indicate which persons you are to describe. Write their names in the spaces prepared at the top of the inside pages. In front of each item are columns of answer spaces. The first column is for yourself, and there is another column for each of the persons you will describe.

Read the items quickly and circle each item you consider to be generally descriptive of yourself at the present time. Leave the answer space blank when an item does not describe you. In the example below, the subject (Column 1) has indicated that Item A is true and Item B is false as applied to him.

Item
A 1 2 3 4 5 6 7 8 well-behaved
B 1 2 3 4 5 6 7 8 suspicious

After you have gone through the list marking those items which apply to you, return to the beginning and consider the next person you have been asked to describe, marking the second column of answer spaces for every item you consider to be descriptive of him (or her). Proceed in the same way to describe the other persons indicated by the test administrator. Always complete your description of one person before starting the next.

Your first impression is generally the best so work quickly and don't be concerned about duplications, contradictions, or being exact. If you feel much doubt whether an item applies, leave it blank.
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<th>Col. 2</th>
<th>Col. 3</th>
<th>Col. 4</th>
<th>Col. 5</th>
<th>Col. 6</th>
</tr>
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<td>always ashamed of self</td>
<td>shy</td>
<td>always ashamed of self</td>
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<td>warm</td>
<td>affectionate and understanding</td>
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<td>overprotective of others</td>
<td>spoils people with kindness</td>
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</table>
WITTRUP MARRIAGE INVENTORY

Marriage Enrichment Objectives

[1-2-3-4-5-6-7]
1 2 3 4 5 6 7
Disagree Agree

You are asked to read each statement and decide on your present state of mind, whether you agree or disagree on a scale of 1-7 (1 represents total disagreement and 7 represents total agreement). You may use the numbers in between to represent reactions that lie between the two extremes.
Wittrup Marriage Inventory

1. Inside, I feel satisfied and fulfilled.

2. I have communicated my personal goals for the next year and feel he/she understands these goals.

3. Although conflict is not enjoyable, it represents the normal irritation of two people living together.

4. I am aware of my spouse's moods and communicate my awareness both verbally and nonverbally.

5. As a person, I feel my spouse accepts and respects the role I play both outside and within the home.

6. I feel fulfilled as a man/woman and sense a state of well-being.

7. I feel opinions and attitudes expressed by in-laws are theirs and need not interfere with our goals and plans.

8. I feel that having children is enjoyable because the rest of my life is fulfilling.

9. The touch of my spouse communicates a clear picture of his/her mood and basic message.

10. I have learned to find fulfillment myself and do not depend upon my spouse for that fulfillment.

11. Instead of fearing the years ahead, I look forward to the opportunities and changes of those years.

12. When I am confused about a message, before I answer, I clarify the message and check out my impression.

13. I see my spouse's role as fulfilling his/her need. for this I accept and respect that role as important and crucial to him/her.

14. My spouse is able to express love through the act of sexual intercourse.

15. My spouse has communicated specific goals for the next year to me and knows that I understand them.

16. Cycles of moods are anticipated and worked with rather than resented by each other.
17. I see to it that my spouse sees our roles as equal and sharing. I regularly let him/her know how important it is.

18. Although I cannot achieve all my life's goals, the happiness I now feel is a goal that I have achieved.

19. When we disagree, I make sure that I hear correctly what spouse is saying and feeling.

20. We have set up a satisfying relationship with in-laws which protects our privacy and home life.

21. I sense that my children enjoy being in the family because they see two parents who love each other.

22. My spouse's special interest or hobby is appreciated by me through the happiness it brings him/her.

23. Together, we have done some long-range thinking of where we want to be in 15 years.

24. My spouse accepts my role and is supportive of that role.

25. I am aware of my own moods and communicate those moods fairly.

26. I feel relatively free of anxiety about the future, because we have shared the goals, personally and collectively.

27. I look forward to the physical touch of my spouse.

28. I have a clear idea of the way my spouse desires to receive a communication.

29. Although there are normal occasional upsets, they do not signify an end to the family life.

30. My awareness of my spouse and his/her interests helps me to understand the uniqueness of my spouse.

31. We feel free to contact our in-laws and spend time with them, not out of obligation, but mutual desire.

32. As I see myself, I accept my life for what it is and cannot blame someone else for its condition.

33. When we share an interest, I become aware of the strengths and weaknesses of my spouse.
34. My goals are specific and attainable rather than just a desire or dream.

35. When we disagree, I make sure that I communicate clearly and correctly what I am saying and feeling.

36. I give my spouse a clear idea of the way I want a communication given.

37. Our marital conflict resolution permits us to listen to our children and their problems.

38. My spouse enjoys spontaneously sexual expression.

39. I recognize the possibility of change in direction for our lives. My respect for my spouse will not change if that happens.

40. When my spouse is talking, I ask questions or restate what he/she has said in order to avoid a misunderstanding.

41. Differences in our moods reflect not a poor marriage but simple difference in people.

42. There are interests I share alone, those I share with my family, and those I share with my spouse.

43. I am aware of 2-3 goals that can be achieved in the near future and their presence brings to my life a direction.

44. I enjoy and initiate spontaneous sexual expression in our marriage.

45. Our conflicts now are limited to the specific issues involved and shut out dead-end issues which lead nowhere.

46. Even though the interests are different from mine, I refrain from making fun of my spouse's interests.

47. Together, we will make vocational decisions and together we will lend support to attain that mutual decision.

48. Our conflicts have become the means to a resolution and not an end in themselves.

49. I communicate sexual desire to my spouse and feel it is my responsibility to express that desire.

50. We look forward to the times we have together as a family.