Journal of Family Psychology
2014, Vol. 28, No. 1, 112–117

© 2013 American Psychological Association
0893-3200/14/$12.00 DOI: 10.1037/a0034984

BRIEF REPORT

Does Premarital Education Decrease or Increase Couples' Later Help-Seeking?

Hannah C. Williamson
University of California–Los Angeles

Thomas E. Trail
RAND Corporation, Arlington, Virginia

Thomas N. Bradbury and Benjamin R. Karney
University of California–Los Angeles

This document is copyrighted by the American Psychological Association or one of its allied publishers.
This article is intended solely for the personal use of the individual user and is not to be disseminated broadly.

Interventions intended to prevent relationship distress are expected to enhance relationship satisfaction and, in turn, reduce the need for later couples counseling. We test this prediction against an alternative possibility: participation in preventive interventions may operate as a gateway for later help-seeking, paradoxically increasing receipt of later couples counseling. A cross-sectional study of 2,126 married individuals examined whether participation in premarital education covaried inversely or directly with couples counseling. Consistent with the gateway hypothesis, receiving premarital education covaried with an increased likelihood of receiving couples counseling. The association between receipt of premarital education and pursuit of couples counseling was moderated by demographic indicators, with the association being stronger for African Americans and for individuals with lower incomes and less formal education. Encouraging the use of premarital interventions may increase the use of therapeutic interventions later in the relationship, especially among high-risk populations.

Keywords: couples, counseling, therapy, premarital education, socioeconomic disadvantage

Premarital education programs show initial promise in improving couple communication and preventing deterioration in relationship well-being (Stanley, Amato, Johnson, & Markman, 2006); however, focusing solely on relationship processes and distress as outcomes in prevention programs overlooks the possibility that these interventions exert an influence on other outcomes, including couples' inclinations to seek counseling later in their relationship. The present study uses data from 2,126 married individuals to investigate (a) the association between participation in premarital education and later couples counseling and (b) whether any link between these two forms of help-seeking is consistent across levels of sociodemographic risk.

Participation in premarital education might affect later use of couples counseling in one of two ways. On one hand, given the apparent benefits that couples may receive from premarital education (e.g., Stanley et al., 2006), we would expect that they would seek therapy at lower rates than those couples who do not receive premarital education. On the other hand, premarital education may serve as a "gateway" to later help-seeking by making couples aware of and comfortable seeking services later in their relationship. Distinguishing between these two alternatives is important: evidence that preventive interventions decrease later help-seeking would bolster claims about their effectiveness, whereas evidence that preventive interventions increase later help-seeking would suggest that explicit discussions of help-seeking could be incorporated into prevention programs as a normative strategy for healthy relationship maintenance. The present work aims to distinguish between these two possibilities.

We hypothesize that couples who received premarital education will seek couples counseling at a lower rate than those who did not. We base this prediction on studies indicating that lower-risk couples are overly represented in premarital education programs (e.g., Sullivan & Bradbury, 1997) and that premarital education can yield benefits for couples. We test this prediction against the alternative view that participation in premarital education operates as a gateway to later help-seeking, such that prior exposure to interventions may increase the acceptability of later interventions or encourage couples' pursuit of later interventions, an idea tested specifically by Schumm, Silliman, and Bell (2000) and articulated explicitly by Stanley (2001). The Schumm et al. (2000) study of married soldiers lends preliminary support to the gateway perspective, but greater statistical control of factors that increase selection

This article was published Online First December 2, 2013.

Hannah C. Williamson, Department of Psychology, University of California–Los Angeles; Thomas E. Trail, RAND Corporation, Arlington, Virginia; Thomas N. Bradbury and Benjamin R. Karney, Department of Psychology, University of California–Los Angeles.

Collection of the data described in this report was supported by a contract from the Florida Department of Children and Families awarded to B.K. Preparation of this report was supported by a National Science Foundation Graduate Research Fellowship awarded to H.C.W.

Correspondence concerning this article should be addressed to Hannah C. Williamson, Department of Psychology, University of California–Los Angeles, 1285 Franz Hall, Box 951563, Los Angeles, CA 90095-1563. E-mail: hwilliamson@psych.ucla.edu

This document is copyrighted by the American Psychological Association or one of its allied publishers.
This article is intended solely for the personal use of the individual user and is not to be disseminated broadly.

into interventions (e.g., religiosity) is needed before this alternative prediction can be held with confidence.

Addressing patterns of service use is particularly important for couples in high-risk segments of the population. Ethnic minorities, couples with low levels of formal education, and couples with low incomes are uniquely vulnerable to having shorter, less stable, and less satisfying marriages (Cutrona, Russell, Burzette, Wesner, & Bryant, 2011). Because high-risk couples may be more likely to experience adverse relationship outcomes and simultaneously less likely than their lower risk counterparts to receive relationship interventions (e.g., Sullivan & Bradbury, 1997), studies are needed to determine how to reduce this disparity by promoting use of services by couples with higher levels of sociodemographic risk.

Accordingly, the second aim of the present study is to clarify whether the association between receipt of premarital education and later participation in couples counseling is uniform across levels of risk. On one hand, this association may be stronger for advantaged couples because of their increased access to resources; on the other hand, the association may be stronger for relatively disadvantaged couples because they may have greater need for services. We distinguish between these alternatives by testing whether income, education, and ethnicity moderate the relationship between receipt of premarital education and couples counseling.

Method

Sampling

Participants were recruited in 2003 as part of the telephone-based Florida Family Formation Survey (Karney, Garvan, & Thomas, 2003). The design of the survey included stratified random sampling of Florida, with oversamples of African Americans, Hispanics, and low-income residents (i.e., household income <200% of the 1999 Federal Poverty Level [FPL]). Furthermore, a random sample of Florida residents receiving Temporary Assistance for Needy Families (TANF) was selected from the complete roster of TANF recipients in the state. We also collected data via random digit dialing in three states with populations comparable to Florida's in terms of density and diversity and that were from different regions of the country: California, Texas, and New York.

Participants

A total of 6,012 people responded to the survey. We restricted our analysis to the 2,184 participants who were currently married and had not been married previously to ensure that any help-seeking experiences from previous marriages did not influence subsequent help-seeking in the current marriage. Of the 895 participants in this subsample who had received premarital education, all but 59 (93.5%) indicated that they had received their premarital education in a religious setting. Although results did not change when these 59 participants were included in analyses, for clarity in interpretation the sample was restricted to only those participants who received education in a religious setting, leaving a final sample size of 2,126.

Among the final sample of participants, 1,384 (65%) were female, 1,369 (64%) were Caucasian, 193 (9%) were Black/African American, 436 (21%) were Latino/Hispanic (non-Caucasian or African American), and 128 (6%) were another race/ethnicity. Of the four states sampled, 1,548 (73%) were from Florida, 206 (10%) were from Texas, 200 (9%) were from New York, and 172 (8%) were from California. On the basis of self-reports of total household income, 26% of participants were categorized as low income (household incomes <200% FPL, or $36,488 for a family of 4), 29% were moderate income (incomes between 200% and 400% FPL), and 45% were high income (incomes >400% FPL, or $72,976 for a family of 4). The average age of participants was 45.6 years (SD = 15.1), and they had been married for 21.1 years on average (SD = 15.9). Participants were not compensated.

Procedure and Measures

Interviewers described the study and asked participants about their experiences, beliefs, and attitudes regarding intimate relationships using the following instruments.

Premarital education. Participants were asked, "Did you and your current spouse have any preparation, such as educational classes, a workshop, or counseling, before you got married?" Responses were coded 0 = *no* and 1 = *yes*. Participants answering "yes" were asked to indicate whether or not their premarital education was "in a religious setting."

Couples counseling. Participants were asked "Have you received counseling for this relationship?" Responses were coded 0 = *no* and 1 = *yes*.

Demographics and control variables. Participants were asked to report their race/ethnicity, their age at marriage, the duration of their marriage (in years), whether they had children with their spouse (dummy-coded 0 = *no children* and 1 = *one or more children*), whether they had a religious wedding (0 = *no*, 1 = *yes*), education level (0 = *less than a college degree* and 1 = *college degree or more*), gender (0 = *male*, 1 = *female*), and their gross family income in the last year. Participants also reported whether they and their spouse had lived together before marriage and whether they had ever received public assistance since the age of 18 (both coded 0 = *no* and 1 = *yes*).

As already noted, only participants who received premarital education in a religious setting were examined here. However, because it is likely that the remaining couples varied in their levels of religiosity, this variable was included as a control variable. Religiosity was assessed using the average of two items: how often they attended religious services (1 = *never, or almost never*; 2 = *occasionally, but less than once per month*; 3 = *one to three times per month*; and 4 = *one or more times per week*), and "all things considered, how religious would you say that you are?" (from 1 = *not at all religious* to 4 = *very religious*). Coefficient α was .71.

Relationship quality was assessed using a 10-item scale. Three items adapted from Stanley and Markman (1992) assessed relationship commitment (e.g., "My relationship with my spouse/partner is more important to me than almost anything else in my life," rated from 1 = *strongly disagree* to 4 = *strongly agree*). Relationship conflict was assessed using five reverse-scored items adapted from the Fragile Families and Child Wellbeing survey (Reichman, Teitler, Garfinkel, & McLanahan, 2001; e.g., "How often does your partner insult or criticize your ideas?" in which 3 = *never or almost never*, 2 = *once in a while*, and 1 = *frequently*). Two questions assessing relationship satisfaction were

taken directly from the General Social Survey (Davis, Smith, & Marsden, 2006; e.g., "All in all, how satisfied are you with your relationship?" rated from 1 = *not at all satisfied* to 5 = *completely satisfied*). Each item was standardized, and the scores were averaged to form an index of relationship quality (α = .80).

Analytic Strategy

Analyses were conducted using logistic regression procedures in SAS 9.2. All categorical variables were dummy-coded and all continuous variables were standardized before analysis. To adjust for the oversampling of African Americans, Hispanics, and low-income residents in the Florida sample, data from that sample were weighted using the product of expansion weights and a poststratification adjustment to ensure that the results were representative of that state. Data from the other three states were not obtained through stratified sampling; therefore, they were not weighted. The squared product of the duration of the respondent's marriage was entered into the models to account for nonlinear effects involving this variable. Moderators were tested by computing a χ^2 statistic comparing the log-likelihood for the model without the interaction to the log-likelihood for the model including the interaction and testing whether adding the interaction enhances the prediction of receiving counseling.

Results

Correlations, means, and standard deviations of all study variables are presented in Table 1. Overall, 39.3% of participants reported that they had received premarital education and 33.5% reported that they had received couples counseling at some time during their marriage.

Association Between Premarital Education and Couples Counseling

To test the hypothesis that receipt of premarital education would be significantly associated with later receipt of couples counseling, we performed a logistic regression predicting receipt of couples counseling, with receipt of premarital education entered as an independent variable, along with the control variables listed above. The results of this analysis are presented in Table 2. Receiving premarital education was significantly related to receipt of couples counseling (b = 1.22, $p < .001$, odds ratio [OR] = 3.40) in a positive direction. Thus, consistent with the gateway hypothesis, participants who received premarital education were more than 3 times more likely to have received couples counseling than were those who did not receive premarital education after controlling for several individual characteristics.

Risk As a Moderator of the Association Between Premarital Education and Counseling

Next, we conducted three analyses examining the interaction between receiving premarital education and one index of risk (income, race, and education) in predicting whether or not participants received couples counseling. In each analysis, the main effects of the other two risk variables were controlled, along with all other control variables listed above. Interaction effects of the

Table 1
Correlations and Descriptive Statistics of All Variables

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1. Relationship quality	—																
2. Premarital education	.10**	—															
3. Religiosity	.11**	.22**	—														
4. Religious wedding	.14**	.40**	.29**	—													
5. Cohabitation	−.10**	−.05*	−.29**	−.26**	—												
6. Children	−.10**	−.05*	.14**	.02	−.13**	—											
7. Age at marriage	−.06*	.01	−.15**	−.06*	.26**	−.28**	—										
8. Duration of marriage	.07*	−.17**	.15**	.19**	−.45**	.27**	−.37**	—									
9. Education	.08**	.18**	.02	.16**	−.07*	−.13**	.16**	−.03	—								
10. Low income	−.18**	−.09**	.01	−.15**	.08**	.10**	−.09**	−.08**	−.28**	—							
11. High income	.11**	.08**	−.05*	.14**	−.04	−.12**	.12**	.03	.29**	−.53**	—						
12. Female	−.03	.05*	.08**	−.03	−.02	.06*	−.25**	−.02	−.05*	.13**	−.07*	—					
13. African American	−.12**	−.02	.18**	−.05*	.06*	.03	.02	−.10**	−.04	.06*	−.07*	−.02	—				
14. Hispanic	−.12**	.02	−.03	−.09**	−.01	.04*	−.02	−.16**	−.10**	.27**	−.23**	.01	−.18**	—			
15. Other race	.01	.01	−.01	−.04	−.01	−.04	.05*	−.07**	.06*	−.05	.03	−.02	−.07**	−.11**	—		
16. Public assistance	−.12**	−.03	.04*	−.11**	.15**	.10**	.01	−.15**	−.16**	.31**	−.25**	.09**	.16**	.03	.03	—	
17. Couples counseling	.04	.35**	.19**	.19**	.01	−.05*	.04	−.10**	.16**	−.13**	.10**	.01	−.01	−.10**	.02	−.01	—
M (*SD*)	0.00 (.60)	0.39 (0.47)	2.82 (0.91)	0.75 (0.43)	0.35 (.47)	0.88 (0.32)	23.93 (5.43)	21.02 (15.89)	0.37 (0.47)	0.25 (0.43)	0.46 (0.49)	0.55 (0.49)	0.10 (0.29)	0.22 (0.41)	0.04 (0.20)	0.12 (0.31)	0.34 (.47)

* $p < .05$. ** $p < .001$.

This document is copyrighted by the American Psychological Association or one of its allied publishers.
This article is intended solely for the personal use of the individual user and is not to be disseminated broadly.

Table 2
Weighted Logistic Regression Predicting Receipt of Couples Counseling

	b	*p*	OR
Relationship quality	−0.09	.098	0.91
Premarital education	1.22	.001	3.40
Religiosity	0.35	.001	1.42
Religious wedding	0.44	.008	1.55
Cohabitation	0.19	.177	1.21
Children	−0.15	.399	0.86
Age at marriage	0.03	.681	1.03
Duration of marriage	−0.23	.003	0.80
Education	0.29	.018	1.33
Low income	−0.47	.005	0.63
High income	0.02	.910	1.02
Female	0.04	.746	1.04
African American	−0.34	.096	0.71
Hispanic	−0.59	.001	0.55
Other race	0.04	.896	1.04
Public assistance	0.18	.339	1.19
Constant	−1.39	.001	

Note. All variables were standardized before entry into the model. African-American, Hispanic, and other race estimates are relative to Caucasian participants. Low-income and high-income estimates are relative to moderate-income participants. $R^2 = .23$.

other two risk variables were not controlled because we were interested in moderating effects of risk in general rather than the incremental effects of the three risk-related interaction terms.

Income interacted significantly with receipt of premarital education to predict the probability of receiving couples counseling (see Figure 1). Although receiving premarital education was associated with an increased probability of receiving counseling for all income groups (all *p*s $< .001$), this effect was stronger for low-income participants than for participants with moderate incomes (*b*s = 1.80 and 1.13, respectively; Wald $\chi^2 = 4.12$, $p = .04$) and high incomes ($b = 1.08$, Wald $\chi^2 = 5.57$, $p = .02$). Specifically, receiving premarital education increased the probability of receiving couples counseling by 32% for low-income participants (from 11% to 44%), whereas the probability only increased by 25% for moderate-income participants (from 23% to 48%) and 24% for high-income participants (from 23% to 47%). Thus, receiving premarital education predicted a greater likelihood of seeking couples counseling for low-income participants than for higher income participants relative to couples who did not receive premarital education in these groups.

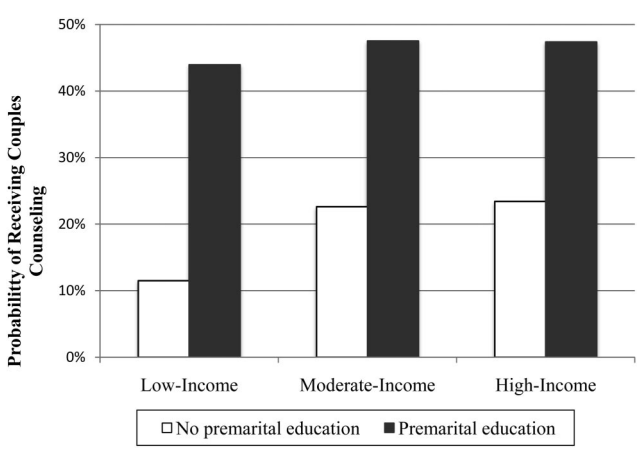

Figure 1. The probability of receiving couples counseling by income level and receipt of premarital education. Low income = household incomes <200% FPL, or $36,488 for a family of 4; moderate-income = household incomes between 200% and 400% FPL; High income = household incomes >400% FPL, or $72,976 for a family of 4.

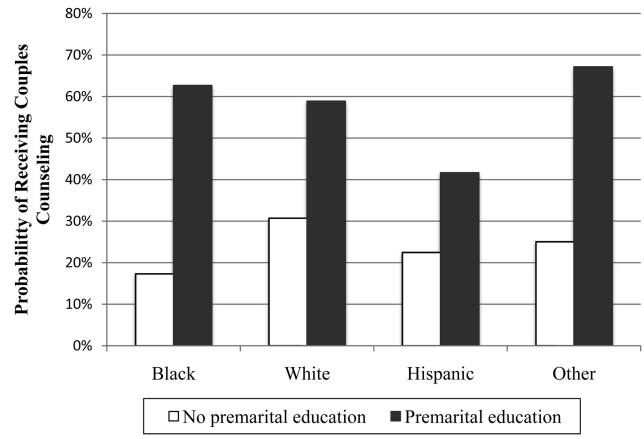

Figure 2. The probability of receiving couples counseling by race/ethnicity and receipt of premarital education.

Race also interacted significantly with receipt of premarital education to predict the probability of receiving couples counseling (see Figure 2). Receiving premarital education was associated with increased probability of receiving counseling for all racial groups (all *p*s $< .002$), but this effect was stronger for African-American participants than for Caucasian participants (*b*s = 2.08 and 1.17, respectively; Wald $\chi^2 = 4.74$, $p = .03$) and Hispanic participants ($b = 0.90$, $\chi^2 = 6.37$, $p = .01$). No other racial groups differed from one another (all *p*s $> .14$). Receiving premarital education increased the probability of receiving couples counseling by 45% for African-American participants (from 17% to 63%), whereas the probability only increased by 28% for White participants (from 31% to 59%) and 19% for Hispanic participants (from 22% to 42%). The probability increased by 42% for other race respondents (from 25% to 67%), although this did not significantly differ from the other three racial groups (all *p*s $> .14$). Thus, the association between receipt and nonreceipt of premarital education and later help-seeking was stronger for African-American participants than for White and Hispanic participants.

Finally, education interacted significantly with receipt of premarital education to predict the probability of receiving couples counseling (see Figure 3). Receiving premarital education was associated with increased probability of receiving counseling for both education groups (*p*s $< .001$), but this effect was stronger for those without a college education than for those with a college education (*b*s = 1.42 and 0.95, respectively; Wald's $\chi^2 = 4.16$, $p = .04$). For example, receiving premarital education increased the probability of receiving couples counseling by 22% for participants with no college degree (from 10% to 32%), whereas the probability only increased by 17% for participants with a college degree (from 16% to 34%). Thus, as with income and race,

This document is copyrighted by the American Psychological Association or one of its allied publishers.
This article is intended solely for the personal use of the individual user and is not to be disseminated broadly.

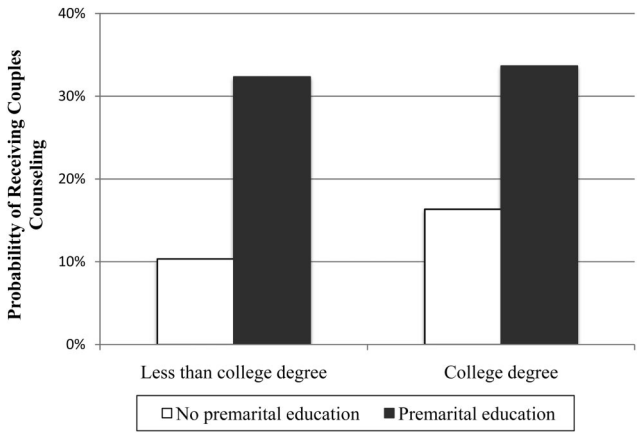

Figure 3. The probability of receiving couples counseling by education level and receipt of premarital education.

compared with those with a college degree, participants with less education were more likely to have sought couples counseling if they had also received premarital education.

Discussion

On the basis of the view that premarital education is designed to enable couples to build and maintain a strong partnership (e.g., Halford, 2011), we predicted that participation in this form of intervention would predict a reduced need for counseling later in the relationship. However, contrary to our prediction, participating in premarital education corresponded with an increased likelihood of participating in couples counseling. This result is consistent with previous research that indicates that prior use of services is predictive of subsequent usage (Doss, Rhoades, Stanley, Markman, & Johnson, 2009). This suggests the possibility that premarital education benefits couples because of the information they receive and because it represents a gateway toward future help-seeking—and that the gateway effect might be at least as great as any effect on satisfaction. Quite apart from the intervention content itself, making couples aware of the availability of relationship interventions and acclimating them to the process of seeking help for relationship issues may make help-seeking more likely later in their relationship.

Additionally, three indices of risk—income, ethnicity, and education—interacted with premarital education to predict couples counseling such that the association between the two forms of help-seeking was reliably stronger for high-risk than low-risk couples. These results suggest that efforts undertaken to increase access to premarital education for high-risk couples in particular may also increase their use of couples counseling. The current study cannot fully explain why these effects are stronger for high-risk couples, but one possibility is that higher risk couples are less likely to be embedded in social networks and environments in which these types of services are widely available and utilized. As a result, they are less likely to know that appropriate interventions exist and how to gain access to them unless they have prior experience with a relationship intervention. Another possibility is that by virtue of their generally lower relationship quality, high-risk couples experience more positive gains from premarital education and are therefore more likely to recognize the benefits of relationship interventions and seek them out again. Indeed, previous research has demonstrated that risk does moderate the effects of premarital interventions, with higher risk couples benefitting more than low-risk couples from communication training over 4 years (Halford, Sanders, & Behrens, 2001). Future studies are needed to replicate this association between use of premarital education and increased likelihood of participation in later couples counseling, especially among high-risk couples, and to clarify whether the benefits of premarital counseling among higher-risk couples mediate this effect.

Juxtaposing the present findings alongside the findings of Stanley et al. (2006) reveals an ostensible paradox in the effects of premarital education: On one hand, Stanley et al. (2006) demonstrated an increase in relationship satisfaction and decrease in divorce, whereas the current study demonstrated increased use of later relationship interventions. However, the Stanley et al. (2006) study also found that the effects of premarital education on relationship satisfaction were strongest shortly after the intervention. This result, corroborated in a meta-analysis showing that the effects of educational interventions on relationship quality and communication fall to nonsignificance in studies with a postassessment and a follow-up assessment (Hawkins, Blanchard, Baldwin, & Fawcett, 2008, Table 1), offers a possible resolution to this paradox. Specifically, the available evidence suggests that couples may experience benefits from an intervention relative to their untreated counterparts (although some null results have been reported; see Markman, Rhoades, Stanley, Ragan, & Whitton, 2010; Rogge, Cobb, Lawrence, Johnson, & Bradbury, in press); that these benefits may weaken over time; and that as treatment effects fade, couples' concerns about their relationship may motivate them to seek relationship counseling. Although this view is speculative, it highlights the value of studying how dissipating intervention effects might spur couples to once again take active steps to strengthen their relationship.

Although the utility of these findings is strengthened by our use of a relatively large sample, extensive use of control variables, and good representation of diverse and high-risk individuals, their interpretation is tempered by several important limitations. First, because our sample was limited to first-time married spouses, our findings cannot be generalized to others, such as second marriages. Second, uncontrolled factors that select individuals into premarital counseling may underlie participation in (or preference for) couples counseling, more so than the premarital education experience itself. Although we have attempted to control for this possibility by including several important covariates in the analyses, this possibility cannot be ruled out without an experimental study. Future studies should also focus on other potential mediators or moderators of the association between receipt of premarital education and couples counseling, such as initial relationship satisfaction, commitment, and life stressors. Third, our assessments of premarital education and counseling provided no information about the interventions themselves, leaving open questions about whether there are specific characteristics of these experiences that might connect them in general and for high-risk couples in particular. Future studies should examine whether the amount or type of premarital education received moderates its association with later help-seeking. Finally, we cannot be certain that respondents were not thinking of a single instance of relationship intervention when

This document is copyrighted by the American Psychological Association or one of its allied publishers.
This article is intended solely for the personal use of the individual user and is not to be disseminated broadly.

answering affirmatively for the items about premarital education and counseling. However, our confidence in these results is bolstered by the significant moderation because we would not expect that a misinterpretation of the questions would occur differentially among high- and low-risk individuals.

In conclusion, the finding that participation in a premarital intervention corresponds to a higher use of couples counseling may suggest a way to promote service usage: Easing access to interventions early in relationships may encourage use of counseling later in relationships, especially among relatively poor couples, African-American couples, and couples with less formal schooling. Although it may seem counterintuitive to devise educational and preventive interventions with the goal of promoting future use of couple therapy, doing so might be a viable strategy for couples who are striving to maintain their relationships despite high levels of social and economic adversity.

References

Cutrona, C. E., Russell, D. W., Burzette, R. G., Wesner, K. A., & Bryant, C. M. (2011). Predicting relationship stability among midlife African American couples. *Journal of Consulting and Clinical Psychology, 79,* 814–825. doi:10.1037/a0025874

Davis, J. A., Smith, T. W., & Marsden, P. V. (2006). *General Social Surveys, 1972–2006 Cumulative codebook*. Chicago, IL: National Opinion Research Center.

Doss, B. D., Rhoades, G. K., Stanley, S. M., Markman, H. J., & Johnson, C. A. (2009). Differential use of premarital education in first and second marriages. *Journal of Family Psychology, 23,* 268–273. doi:10.1037/a0014356

Halford, W. K. (2011). *Marriage and relationship education: What works and how to provide it*. New York, NY: Guilford Press.

Halford, W. K., Sanders, M. R., & Behrens, B. C. (2001). Can skills training prevent relationship problems in at-risk couples? Four-year effects of a behavioral relationship education program. *Journal of Family Psychology, 15,* 750–768. doi:10.1O3377////OO88993-32O0.15.4.750

Hawkins, A. J., Blanchard, V. L., Baldwin, S. A., & Fawcett, E. B. (2008). Does marriage and relationship education work? A meta-analytic study. *Journal of Consulting and Clinical Psychology, 76,* 723–734. doi:10.1037/a0012584

Karney, B. R., Garvan, C. W., & Thomas, M. S. (2003). *Family formation in Florida: 2003 baseline survey of attitudes, beliefs, and demographics relating to marriage and family formation*. Gainesville, FL: University of Florida.

Markman, H. J., Rhoades, G. K., Stanley, S. M., Ragan, E. P., & Whitton, S. W. (2010). The premarital communication roots of marital distress and divorce: The first five years of marriage. *Journal of Family Psychology, 24,* 289–298. doi:10.1037/a0019481

Reichman, N., Teitler, J. O., Garfinkel, I., & McLanahan, S. (2001). The Fragile Families and Child Well-Being Study: Sample and design. *Children and Youth Services Review, 23,* 303–326. doi:10.1016/S0190-7409(01)00141-4

Rogge, R. D., Cobb, R. J., Lawrence, E., Johnson, M. D., & Bradbury, T. N. (in press). Is skills training necessary for the primary prevention of marital distress and dissolution? A 3-year experimental study of three interventions. *Journal of Consulting and Clinical Psychology*.

Schumm, W. R., Silliman, B., & Bell, D. B. (2000). Perceived premarital counseling outcomes among recently married army personnel. *Journal of Sex & Marital Therapy, 26,* 177–186. doi:10.1080/009262300278579

Stanley, S. M. (2001). Making a case for premarital education. *Family Relations: An Interdisciplinary Journal of Applied Family Studies, 50,* 272–280. doi:10.1111/j.1741-3729.2001.00272.x

Stanley, S. M., Amato, P. R., Johnson, C. A., & Markman, H. J. (2006). Premarital education, marital quality, and marital stability: Findings from a large, random household survey. *Journal of Family Psychology, 20,* 117–126. doi:10.1037/0893-3200.20.1.117

Stanley, S. M., & Markman, H. J. (1992). Assessing commitment in personal relationships. *Journal of Marriage and the Family, 54,* 595–608. doi:10.2307/353245

Sullivan, K. T., & Bradbury, T. N. (1997). Are premarital prevention programs reaching couples at risk for marital dysfunction? *Journal of Consulting and Clinical Psychology, 65,* 24–30. doi:10.1037/0022-006X.65.1.24

Received June 16, 2013
Revision received September 20, 2013
Accepted September 26, 2013 ■

This document is copyrighted by the American Psychological Association or one of its allied publishers.
This article is intended solely for the personal use of the individual user and is not to be disseminated broadly.