

FAMILY COHESION IN REMARRIED FAMILIES

by

Thomas Alton Smith, Jr.


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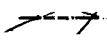
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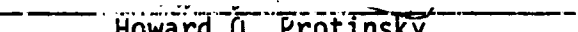
Family and Child Development

APPROVED:

  
James F. Keller, Chair

  
Leland J. Axelson

  
Joseph W. Maxwell

  
Howard O. Protinsky

  
John A. McLaughlin

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Thomas Alton Smith Jr.

Committee Chairman: James F. Keller  
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(ABSTRACT)

A random sample of sixty-eight remarried families was studied by use of FACES III, a widely accepted measure of family cohesion. The purpose of the study was to examine family cohesion in remarried families. Specifically, family cohesion in remarried families was compared with cohesion in a norm group of intact families, as well as investigated in light of the effects of specific variables associated with remarried families.

The results indicated that stepparents and natural parents' perceptions of cohesion did not differ significantly. The results confirmed that cohesion levels of remarried families with adolescents were lower than the cohesion levels of other remarried families in this study. Remarried families with adolescents also were found to have significantly lower levels of cohesion than other intact families with adolescents. Cohesion levels of remarried families in other life cycle stages were not found to differ significantly from cohesion levels of other intact families. Complexity of remarried family structure and years in the remarried family did not significantly affect the perceived cohesion levels.

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## TABLE OF CONTENTS

Chapter		
I.	INTRODUCTION AND STATEMENT OF THE PROBLEM . . . . .	1
	Purpose . . . . .	3
	Definition of Terms . . . . .	4
	Theoretical Framework . . . . .	5
II.	RATIONALE AND HYPOTHESES . . . . .	9
III.	REVIEW OF THE LITERATURE . . . . .	13
	Family Cohesion . . . . .	13
	Family Cohesion in REM Families . . . . .	17
	Other Variables Affecting REM Family Cohesion . . . . .	19
IV.	PROCEDURE . . . . .	25
	Selection of Subjects . . . . .	25
	Procedures . . . . .	26
	Instrument . . . . .	28
	Analysis of Data . . . . .	32
V.	RESULTS . . . . .	35
	Subjects . . . . .	35
	FACES III Norm Subjects . . . . .	45
	Test of Hypotheses . . . . .	46
	Discussion . . . . .	57
	Methodological Implications . . . . .	61
	Theoretical Implications . . . . .	63
VI.	SUMMARY . . . . .	66
	LITERATURE CITED . . . . .	69
	APPENDIX A . . . . .	74
	VITA . . . . .	81

## LIST OF TABLES

Tables	Page
1. Cohesion and Adaptability Items and Factor Analysis of Faces III . . . . .	29
2A. Cutting Points and Distribution of FACES III Cohesion Scores for REM Families and Norm Group Families with Adolescents . . . . .	33
2B. Cutting Points and Distribution of FACES III Cohesion Scores for REM Families and Norm Group Families without Adolescents . . . . .	33
3. Summary of Selected Demographic Characteristics of REM Families . . . . .	36
4. Summary of Selected Demographic Characteristics of Subjects . . . . .	38
5. Summary of Other Selected Demographic Characteristics of Subjects . . . . .	40
6. Summary of Children in REM Families . . . . .	41
7. Means and Standard Deviations of Family Cohesion Scores for REM Families According to Adolescent's Presence and Presence of Adolescent Questionnaire . . . . .	48
8A. Chi-Square Comparison of Distribution of Cohesion Scores between REM Families with Adolescents and Norm Families with Adolescents . . . . .	51
8B. Chi-Square Comparison of Distribution of Cohesion Scores between REM Families with Adolescent Questionnaires and Norm Families with Adolescents . . . . .	51
9A. Means and Standard Deviations of the Family Cohesion Scores for REM Families with Adolescent Questionnaires and Those without Adolescent Questionnaires According to the Number of Years Married . . . . .	54

LIST OF TABLES continued)

Tables	Page
9B. Means and Standard Deviations of the Family Cohesion Scores for REM Families with Adolescent Questionnaires and Those without Adolescent Questionnaires According to the Family Type . . . . .	54
9C. Means and Standard Deviations of the Family Cohesion Scores for REM Families with Adolescents in the Home and Those without Adolescents According to the Number of Years Married . . . . .	55
9D. Means and Standard Deviations of the Family Cohesion Scores for REM Families with Adolescents in the Home and Those without Adolescents According to the Type of Family . . . . .	55

## Chapter 1

### Introduction and Statement of the Problem

The interest of family researchers and clinicians in remarried families has increased over the last fifteen years coinciding with the increasing divorce rate. Predictions have been made that remarried families may become the predominant family form in America (Duberman, 1975; Visher and Visher, 1979).

Remarried family research has predominantly focused upon stepparent-stepchild relations. The negative aspects of the above step relations have been stereotyped in much of the popular literature, e.g., Cinderella. Early professional literature focused mainly upon the negative effects on children of being members of families of remarriage (REM). Much of the more recent published work concerning remarried families has been authored by clinicians, working with dysfunctional REM families, emphasizing the potential problem aspects of remarried family membership and formation (Esses and Campbell, 1984). The amount of empirical research focused upon any aspect of remarried family life and relationships has been small (GAP, 1973; Clingempeel, 1981; Esses and Campbell, 1984).

Positively functioning REM family life has been neglected by family researchers and authors (Furstenberg and Spanier, 1984;

Knaub, Hanna, and Stinnett, 1984). Developing a body of knowledge concerning positive functioning in REM families is particularly important because of the inappropriateness of utilizing the intact first marriage family as a model for understanding REM families (Carter and McGoldrick, 1980; Crosbie, 1984; and Visher and Visher, 1985). Cohesion has been identified as a factor critical to the positive functioning of REM families (Carter and McGoldrick, 1980; Einstein, 1982; Visher and Visher, 1982; and Walker and Messinger, 1979). All of the above references are clinical reports not empirical studies. Cohesion in REM families has been previously addressed in nonempirical, clinical reports or poorly designed empirical studies (Esses and Campbell, 1984). Another problem found in the REM family literature, concerning cohesion, is the lack of specificity in defining the various levels of cohesion. In the literature concerning REM families and cohesion, the distinction Esses and Campbell (1984) made concerning empirical and nonempirical is the norm. In the present research nonempirical, clinical reports denote conclusions based upon clinical experience, not the result of the application of any qualitative or quantitative research design. Empirical findings denote conclusions based upon the results of the completion of a research project utilizing an accepted qualitative or quantitative design. Though cohesion has proven to be important in the assessments of REM families by clinicians, the lack of empirical



investigation leaves a serious gap in the continuing effort to better understand REM family life.

Empirical findings do not imply uncontrolled, descriptive or observational results. In the present research empirical findings denote results based upon the use of qualitative or quantitative research designs. Controlled observational methods, such as applied behavioral analysis or formal case study designs are acknowledged as valuable, accepted research methods, though these methods have, unfortunately, not been utilized in REM family research.

#### Purpose

The purpose of this research was to examine family cohesion in nonclinic REM families. Specifically, the design of this research included comparisons of cohesion in REM families with norms developed using intact families, as well as investigation of the effects of specified demographic variables on cohesion in REM families. It was hoped that this investigation would contribute to the development of an empirically based profile of cohesion in REM families, as well as promote a greater understanding of REM family life. After measurement of the cohesion dimension, as perceived by various adolescent and adult family members, REM cohesion was investigated as a function of the following variables: role of parents, stepparent or natural parent; complexity of the REM family depending on how many sets of children resided in the home and visited regularly; number of years in the REM family; and presence of adolescents in the family.

### Definition of Terms

The following definitions are relevant to the present study:

- (1) Adolescent - a child between the ages of 12 and 18. This age range is the same as defined and utilized in the FACES III normative sample.
- (2) Children residing in the home - children who live in the home at least six months per year.
- (3) Visiting child - a child who visits in the home for at least one overnight visit per week or who resides in the home at least three months per year (ex. entire summer vacation).
- (4) A set of children - a group of children from a marriage. The father's children from a prior marriage constitute a set of children while the children from the present remarriage constitute a separate set of children. A set may be divided by residence, forming different sets. The father may have a prior marriage child residing in the home and one who visits regularly, which constitute two different sets.
- (5) Remarried family (REM) - a family in which one or both of the partners is in at least a second marriage. The present remarriage must be of at least six months duration. At least one child must reside in the home.

- (6) Simple REM families - REM families in which only one set of children reside. The one set of children may be children from either partner's prior marriage but may not be a child or children from the present marriage.
- (7) Simple/complex REM families - REM families in which one set of children reside and one set visit.
- (8) Complex REM families - REM families in which at least two sets of children reside.
- (9) Family cohesion - defined as "the emotional bonding that family members have toward each other" (Olson, Russell, and Sprenkle, 1983, p. 80). Four levels of family cohesion are differentiated, ranging from disengaged (very low) to separated (low to moderate) to connected (moderate to high) to enmeshed (very high).

### Theoretical Framework

The hypotheses to be examined are derived from the literature on remarried families and elements of the Circumplex Model developed by David Olson and his colleagues (1979, 1980, 1983, 1985). The Circumplex Model combines two, independently derived dimensions of cohesion and adaptability to identify a family's location within these two dimensions. Communication is hypothesized to facilitate movement on the cohesion and adaptability dimensions. Olson and his colleagues have developed a self administered questionnaire, FACES, to assess the two dimensions of the Circumplex Model. The fact that the dimensions

of the Circumplex Model were independently derived allows each to be focused upon individually as has been the case in past research (Bentley, 1983; Sprenkle, 1979). The hypotheses deriving from the Circumplex Model include both the cohesion and adaptability dimensions and suggest balanced levels of cohesion and adaptability to be optimal. The focus of the present research is on the cohesion dimension, therefore only the elements of the Circumplex Model specifically related to cohesion are addressed.

The cohesion dimension is divided into four levels (from low to high): disengaged, separated, connected, and enmeshed. The Circumplex Model hypothesizes that there is a curvilinear relationship between adequate family functioning and the dimension of cohesion. The two extreme levels of cohesion, disengaged and enmeshed, are more likely associated with family dysfunction while the two middle levels, separated and connected, are more likely associated with adequate family functioning (Olson et al., 1980). This hypothesis has been validated empirically in numerous studies (Olson et al., 1980; Olson, Portner, and Bell, 1982; Russell, 1979).

The Circumplex Model addresses the dynamic nature of families by hypothesizing that families will change their cohesion level to deal with situational stress and changes in the family life cycle. The literature on the REM family identifies it as a family form different from intact, first marriage families, facing a potentially problematic number of stresses (Carter and McGoldrick, 1980; Sager et al., 1983;

Visher and Visher, 1979). REM families may be families to which the hypothesis concerning stress applies.

Olson and his colleagues (1983) suggested that the Circumplex Model integrates aspects of general systems theory, as expressed by Minuchin (1974) with family developmental theory, as expressed by Hill and Rodgers (1964) and Duvall (1970). Olson and colleagues supported the above statement by pointing out that their Circumplex Model takes into account developmental change, while systemically recognizing that individual family members affect change on the family and vice versa. Olson and colleagues have hypothesized different Circumplex family types to be clustered in different family developmental stages (Olson, et al., 1983). Aspects of systems theory and family developmental theory have been applied to REM families (Carter and McGoldrick, 1980; Papernov, 1984; Sager et al., 1983; Visher and Visher, 1979; Whiteside, 1982). The importance of permeable boundaries within REM families and between REM families and outside systems, and the emphasis placed upon dealing with the family members not included in the nuclear REM family represent aspects of systems theory applied to REM families. The idea that REM families move through developmental stages and the emphasis placed upon how segments of families, probably in different stages, come together in REM families are important aspects of family developmental theory applied to REM families. The above cited REM literature also distinguishes REM family development as different and more stressful than normal family development.

Because of the differences between REM families and intact, first marriage families, various authors have called for normative data on REM families (Esses and Campbell, 1984; Furstenberg, 1980; Visher and Visher, 1985).

The elements of the Circumplex Model which apply to cohesion seem to effectively integrate the aspects of systems and family developmental theory that have been applied to REM families. Though there is empirical validation for most of the hypotheses generated from the Circumplex Model, these have not been proven to apply to REM families.

## Chapter II

### Rationale and Hypotheses

A review of the available literature concerning REM families clearly identifies cohesion as an important dimension. The majority of the literature is authored by clinicians and is based upon experience working with dysfunctional REM families. If cohesion is a key factor to the positive functioning of REM families, as clinical authors claim, then it is important that empirical validation with nonclinic REM families occur.

Cohesion in REM families may be affected by a variety of variables. One important variable is the parental role of the remarried partners. A stepparent is faced with a number of challenges that do not face the natural parent spouse (Visher and Visher, 1979). Stepparents may not experience as much cohesion as the natural parent, who has an existing emotional bond with family members. Therefore, it was hypothesized that:

Hypothesis 1: Stepparents will report significantly less cohesion than natural parents in REM families.

Authors have suggested that REM families face a particularly difficult time, developmentally, when adolescents are part of the family. Various authors have stated that the adolescent's task of

moving toward independence often clashes with the REM family's need to pull together and develop cohesion (Capaldi and McRae, 1980; Carter and McGoldrick, 1980; Sager et al., 1983). Olson and colleagues (1985) developed a set of norms, on FACES III, for families with adolescents, separate from the norms for families in all the other family life stages. Olson and colleagues found significantly lower levels of cohesion in families with adolescents than those without adolescents. Based upon the finding that cohesion levels appear to be lower in intact families with adolescents, and the suggestion that adolescence is a particularly problematic time in REM families with cohesion suffering, it is hypothesized that:

Hypothesis 2: REM families, which include adolescents, will report significantly lower levels of cohesion than those REM families that do not include an adolescent.

Various authors have stated that optimally functioning REM families have lower levels of cohesion than intact, first marriage families (Carter and McGoldrick, 1980; Perkins and Kahan, 1979; Sager et al., 1983; Visher and Visher, 1979). The literature suggests that REM families are different from intact, first marriage families (Knaub et al., 1984; Papernov, 1984). The more complex developmental cycle in REM families demands more change in the levels of closeness and permeability of boundaries, both dimensions of cohesion. The above suggests that REM families have lower levels of cohesion than intact,



first marriage families. Though the above statement is thoroughly supported in the clinical literature, it has not been empirically validated. Therefore, it is hypothesized that:

Hypothesis 3: REM families will report significantly lower levels of cohesion than intact, first marriage families.

There are various levels of complexity in REM family structure that affect the types of boundaries and closeness of relationships (Clingenpeel, 1981). Some of the previous research with REM families has utilized two distinctions of structural type, complex and simple. Complex families included two or more sets of children, while the simple type included one set of children (Clingenpeel, 1981; Furstenberg and Spanier, 1984). A type of REM family structure that has not been addressed in the literature is that in which children visit regularly in the home. Neither of the above cited studies controlled for visitation. A family type was defined for this research, simple/complex, which includes visiting children. The additional complexity, need for permeable boundaries, and variety of developmental needs that more complex REM family structures create lead to the hypothesis that:

Hypothesis 4: The more complex the REM family structure, the lower the level of perceived cohesion. The simple/complex type will yield the lowest cohesion levels, followed by complex and simple types.

The amount of time since remarriage may have an effect on REM family cohesion. Three years appears to be the average time period identified as needed to adjust to REM family formation (Roosevelt and Lofas, 1976; Visher and Visher, 1979). The reported amount of time needed to adjust varies from a low of one year (Wallerstein and Kelly, 1980) to a high of five years (Pendergast, 1980). Three years seems to be an average adjustment period cited, though there is quite a bit of disagreement concerning this important variable. It is logical to assume that cohesion would grow as a REM family stays together longer. In contrast, a commonly reported occurrence in new REM families is an attempt at premature closeness or report of pseudocloseness (Carter and McGoldrick, 1980; Sager et al., 1983). Well adjusted REM families should have developed permeable boundaries and an appropriately lower level of cohesion, according to previously cited literature. On the one hand, the literature suggests that cohesion may be reported prematurely as high. On the other hand, cohesion may actually be greater the longer the family continues together or it might be that cohesion settles into a comfortable but lower level. Based on the conflicting possibilities that arise from the literature, the following, nondirectional hypothesis was tested:

Hypothesis 5: There will be no difference between the reported levels of cohesion in REM families together three years or less and those together more than three years.

## Chapter III

### Review of the Literature

#### Family Cohesion

Cohesion has been identified as an important variable in family studies. Angell (1936), a family sociologist, identified family integration and adaptability as important family variables. Through a grounded theory approach, utilizing case records, he was able to use these two dimensions to classify families' reaction to the depression.

Hill, in a classic study, examined integration and how it affected families dealing with war separation. His conclusions were that family integration was an important variable in the families' ability to handle the stress of separation (Hill, 1949).

It was not until Hess and Handel (1959), in an often cited study, published the results of their case studies of 33 families, that cohesion was again identified as an important family dimension. They described cohesion in families as a continuum between separateness and connectedness. They emphasized that each family develops unique levels of separateness and connectedness according to the developmental needs of that family.

A majority of the literature on cohesion in families is authored by psychiatrists specializing in family therapy. Psychiatrists'

primary attention has been on clinical populations focusing on the extreme levels of cohesion (Olson, Sprenkle, and Russell, 1979). About the same time that Hess and Handel (1959) published their findings, Lyman Wynne and his colleagues (1958) described levels of cohesion in families with a schizophrenic member. The levels described ranged from pseudo mutual (high cohesion) to pseudo hostile (low cohesion). Bowen (1960), also working with families of schizophrenics, described levels of cohesion ranging from undifferentiated family ego mass (high cohesion) to emotional divorce (low cohesion).

More recently, Nye and Rushing (1969) identified aspects of family solidarity that all deal with different aspects of integration. They defined integration in families as the ability to function as a unit with common goals and shared activities.

Kantor and Lehr (1975) developed a distance regulation model for families based on cohesion. They observed 19 families and concluded that families regulate or balance the levels of closeness and autonomy between members. Kantor and Lehr suggested that distance is a function of the amount of cohesion family members perceive.

Minuchin (1967, 1974) has operationalized an important aspect of cohesion, boundaries in families, in his development of structural family therapy theory. Based upon clinical observation, he suggests that disengagement (rigid boundaries) and enmeshment (diffuse boundaries) are the extreme positions on a continuum of family

boundaries that allows various amounts of closeness or cohesion within families and between families and the environment. Minuchin emphasizes the dynamic aspect of boundaries and cohesion in families (Minuchin, 1974).

Cohesion has also been identified as an important variable to families by the anthropologist Paul Rosenblatt. He describes the extremes of cohesion as togetherness and apartness. Rosenblatt suggests that families must find a balance between the two extremes, even though, in America, togetherness is valued more highly (Rosenblatt, 1975).

Olson and his colleagues (1979) have reviewed and synthesized 40 conceptualizations of cohesion, including many of the above mentioned authors, to develop the dimension of family cohesion they have defined. They have differentiated four levels of cohesion ranging from disengaged (very low) to separated (low to moderate) to connected (moderate to high) to enmeshed (very high). Olson and his colleagues reviewed the research on cohesion in normal families and special groups such as: families of delinquents, families of alcoholics, and families in therapy (Olson, Russell, and Sprenkle, 1979). The studies they reviewed supported the theory that balanced levels of cohesion were important to normal family functioning. They further stated that the congruence of findings across studies using different conceptual and operational definitions attests to the potency of the cohesion dimension (Olson et al., 1979).

Olson and his colleagues state that the importance of the cohesion dimension is attested to by its conceptualization in so many different social science fields (Olson et al., 1979). Much of the literature on cohesion is authored by clinicians, particularly psychiatrists, and focuses on the extreme dimensions of cohesion in atypical families. Validation is presented for the theory that, generally, balanced levels of cohesion are more likely associated with normally functioning families, while extreme levels of cohesion are more associated with problematic families.

There has been empirical research conducted with families addressing cohesion and its importance as a dimension of family functioning. The same statement cannot be made concerning REM families and cohesion. Cohesion in REM families has been previously addressed in nonempirical, clinical reports or poorly designed empirical studies (Esses and Campbell, 1984).

The remainder of the literature review will address the conceptualizations put forth concerning cohesion in REM families. Aspects of REM family life that affect cohesion will be reviewed. These aspects include: boundaries, emotional bonding, life cycle developmental issues and time needed to adjust to REM family life.

### Family Cohesion in REM Families

The subject of cohesion in REM families has been addressed in a number of publications. Carter and McGoldrick (1980), in their book chapter on REM family formation, state that the REM family is faced with accepting lower cohesion than first marriage families. Their opinion is based upon their clinical experience.

An often referenced article by Walker and Messinger (1979) suggests that REM families need lower levels of cohesion than intact first marriage families to function optimally. Their article was based upon clinical work with 22 couples in a REM family group. No attempt was made to apply any research methods with this sample to empirically test the conclusions.

Clifford Sager and his associates at the Remarried Consultation Service in New York also suggest that lower cohesion than that believed to be optimal in first marriage families is optimal in REM families. Their beliefs are based upon their clinical experiences (Sager et al., 1983). The work of Sager and associates is well respected and often cited in family therapy circles, in spite of the lack of scientific rigor applied in gathering or analyzing the findings.

Visher and Visher (1979), based upon clinical and group experiences, suggest that lower cohesion in REM families than in first marriage families is optimal. Numerous other authors also have made the claim for lower cohesion in REM families than in first marriage

families, based upon clinical experience not empirically derived research results (Berman, 1980; Einstein, 1982; Keshet, 1980; Kosinski, 1983).

Perkins and Kahan (1979) carried out an empirical study comparing 40 volunteer families, 20 stepfather families and 20 natural father families. They administered the Family Concept Q Sort, Semantic Differential, a demographic questionnaire, and interaction-reaction questionnaire to the parents and one 12-15 year old in each family. The systems model of Kantor and Lehr (1975) was the theoretical model utilized. REM families were found to be less well adjusted and less satisfied with their families than the natural parent families. All family members basically agreed on this assessment. It appeared that REM family members didn't understand each other very well. The results suggest that REM family members do not allow each other into their interpersonal subsystems even though they are allowed into the family unit subsystem. Cohesion was too low, not allowing for enough emotional bonding and communication to occur for the family to function optimally, according to the authors. The authors suggested that optimal functioning would involve access to all interpersonal subsystems as well as extrafamilial systems.

Bowerman and Irish (1962) studied perceptions of stepparents by children. Utilizing a sample of 2,145 stepchildren in grades 7-9, they concluded that stepchildren perceived their stepparents less positively than natural parent children perceived their natural



parents. They also noted that cohesion in the REM families was lower than in the natural parent families.

Family cohesion in REM families has clearly been identified as, optimally, lower than in first marriage families. Only two empirical research articles were located which addressed cohesion in REM families. Neither article addressed cohesion as a research question directly. Both empirical articles indicated that cohesion was lower in REM families than in natural parent families and that the lower levels of cohesion may be a negative factor in family functioning. What the optimum level of cohesion might be was not empirically addressed. Though the nonempirical literature uniformly agrees that lower cohesion in REM families than in intact families is optimal, the research literature only addresses the actual level of cohesion, not the optimum level. Even this limited empirical attention is incidental to the purposes of the two studies.

#### Other Variables Affecting REM Family Cohesion

The importance of REM families having permeable boundaries, an aspect of low cohesion, has been stressed in a number of the studies previously reviewed (Carter and McGoldrick, 1980; Einstein, 1982; Keshet, 1980; Kosinski, 1983; Sager et al., 1983; Walker and Messinger, 1979). In a theoretical article on stepfamily developmental issues, Whiteside (1982) stated that the importance of permeable boundaries within the REM family pertained to the ability of children with dual household membership to move between families. Messinger

(1976) and Rhodes and Wilson (1981) both published clinical articles in which they found that, in their experience, permeable boundaries were key to successful adaptation to REM family life.

Clingempeel (1981) studied marital quality, using 40 REM couples. He found that permeable boundaries involving the entire kin network were optimal. This was the lone empirical article that addressed boundaries in REM families.

Another factor that influences cohesion in REM families is emotional bonding. In REM families people live together who may share no common history, natural kinship relationships, and may be no more than very casually acquainted. A number of the studies previously mentioned state that it is unreasonable and usually counterproductive to expect that all members of REM families will bond together in "instant love" (Capaldi and McRae, 1979; Einstein, 1982; Issacs, 1982; Visher and Visher, 1982). The above referenced articles are all based upon clinical experience.

Wallerstein and Kelly (1980) did longitudinal work with 60 families of divorce and remarriage over a five year period. They reported that premature efforts at bonding were detrimental to family functioning and led to difficulty in true bonding as time went on. This finding reflects the issue addressed by the clinicians, that it is not uncommon for REM families to push prematurely toward emotional bonding which interferes with later true bonding. Fast and Cain (1966), in one of the first major clinical articles about REM

families, may have accurately summed up this issue. They stated that to expect family bonding in REM families to ever reach the levels of bonding common to first marriage families is unrealistic.

Remarried family developmental cycles and stages have been of some interest to family theorists (Mills, 1984; Papernov, 1984; Whiteside, 1982). The emphasis in these theoretical articles has been on the different developmental tasks faced by REM families, when compared to first marriage families. Papernov (1984) based her proposed developmental stages upon interviews with 9 REM families and reports validating her stages with 100 other REM families. There are no empirical studies that address the developmental stages in REM families. Clinical authors have suggested that adolescence may be an even more turbulent time in REM families than in intact families (Carter and McGoldrick, 1980; Sager et al., 1983). They base this observation on the possible clash between the adolescent's natural movement toward autonomy from family and the REM family's need to pull together as a family.

There have been two empirical studies that utilized distinctions between types of REM families (Clingempeel, 1981; Furstenberg and Spanier, 1984). Clingempeel (1981) studied marital quality and kin relationships in 27 REM families. In his research he created 2 distinctions in type. Single REM families were those in which the mother had children and the father did not. The mother's children resided in the home. Complex families were families in which

the mother's children resided in the home and the father's did not. Clingempeel found that complex families reported lower marital quality on 4 measures of marital quality. He also found that permeable boundaries with the extended and previous kin group was predictive of marital quality.

Furstenberg and Spanier (1984) interviewed 134 REM families in a longitudinal research study. They addressed 2 family types with children. Simple families had one set of children while complex families had two sets. Their findings suggest that the complexity of the family does not significantly affect marital quality. They reported that 78% of the simple and 77% of the complex families agreed with the statement, "Raising children part time is much more difficult than raising them full time" (Furstenberg and Spanier, 1984, p. 438).

Neither of the two above reviewed empirical studies addressed cohesion per se. Clingempeel (1981) did hypothesize in his discussion section that permeable boundaries were optimal, at least concerning marital quality. He did report more negative interaction in complex REM couples. Neither study controlled for visitation of children, though Furstenberg and Spanier indirectly addressed how visitation might affect REM families through the question they asked pertaining to visitation. The clinical reports cited earlier in this review suggested that more permeable boundaries and lower cohesion levels were needed in more complex REM family situations (Carter and

McGoldrick, 1980; Einstein, 1982; Kosinski, 1983; Sager et al., 1983; Visher and Visher, 1979).

Various authors have suggested that a certain amount of time in the remarriage is significant to optimal adjustment. The time span suggested is invariably based upon the clinical experience of the authors. Time in the remarriage is another variable that has been often quoted but not validated empirically. Several of the previously cited articles have addressed the time issue (Carter and McGoldrick, 1980; Papernov, 1984; Roosevelt and Lofas, 1976; Visher and Visher, 1979; Wallerstein and Kelly, 1980). Other authors, all of whom are mental health practitioners, have made statements concerning the matter of time for adjustment varying from 1 to 5 years (Goldner, 1982; Pendergast, 1980; Stern, 1978). None of the cited articles specifically addresses cohesion directly and how it may be affected by time. Carter and McGoldrick (1980), Golder (1982) and Sager and his associates (1983) do address the issue of pseudomutuality. Pseudomutuality refers to high cohesion which REM families may present in early remarriage as a reaction to their shattered previous family experiences. Other clinical authors discussing REM families, based upon their clinical experiences, have also identified pseudomutuality as a common occurrence in clinic REM families (Goldstein, 1974; Kaplan, 1977; Jacobson, 1979). The incidence of pseudomutuality in nonclinic families has, unfortunately, not been addressed.

The literature suggests that cohesion is an important variable in family well being and adjustment in a number of areas. Extremely low or high cohesion has been identified as usually dysfunctional or associated with family dysfunction. The literature on REM families also identifies cohesion as important. Lower cohesion than is optimal for intact first marriage families has been identified as optimal for REM families. Various aspects of REM families, particularly boundaries and emotional bonding, have been identified as responsible for the low cohesion. Other variables such as developmental stage, complexity of family type, and time in remarriage have not been directly associated with levels of cohesion, clinically or empirically, but may be significantly linked, given some direct observations and findings reported. The questions concerning REM families and cohesion remain to be validated empirically.

## Chapter IV

### Procedure

This chapter includes a description of all procedures utilized in the research to collect and analyze the data. Specifically, the selection of subjects, procedures for data collection, description of the instrument, and methods of analysis are all discussed in separate sections.

#### Selection of Subjects

Subjects for the study were obtained through a systematic random sample of the public marriage records in the city of Roanoke, Virginia. The records sampled included all remarriages occurring in Roanoke between June 30, 1979 and December 31, 1984. There were 3430 remarriages during this period of time. A total of 490 families were selected between the above dates. The sampled couples were chosen systematically from the list using a random start. The seventh couple was the first selected, and each seventh couple thereafter. If the seventh name was not currently listed in the Roanoke area telephone directory, the next couple was checked for inclusion. If the following seven couples were not listed, the group of seven was skipped, and the seventh name since the previous seventh name was checked for a telephone listing. This procedure yielded the final

sample of 490 REM families, all of whom appeared to have had a telephone listing in the Roanoke area directory. It was decided that this disadvantage was outweighed by the advantage of increased possibility of contacting the potential subjects identified. Kitson and his colleagues (1982) identified public records as a means of providing a cross section of the population. They also stated that locating the subjects is the major difficulty with public records, the reason telephone listings were utilized.

### Procedures

An attempt was made to contact every family in the original sample by telephone. Of the original 490 families 411 were contacted. The 79 which were not contacted constituted wrong numbers, disconnections, incorrect identifications, and those never found at home. A minimum of five attempts were made to contact each family. Each family contacted was given a brief explanation of the project and a question of interest was made to one of the spouses in the house. If the family was interested in participating then eligibility was determined. To be eligible the family had to include: a couple in which one or both partners was in a second marriage; the present remarriage must have been of at least six months duration; both spouses must have been currently residing in the same home; and at least one child must have been residing in the home. Of the 411 contacted families 23.6% or 97 declined the initial request outright, 54.2% or 223 were not eligible to participate in the research because



they did not meet all of the eligibility requirements. No attempt was made to replace those families who were determined to be ineligible from the original population of remarried families. Ninety-one families or 22.1% of the 411 families met all eligibility requirements and agreed to participate in the project. All of the 91 families were asked to allow the researcher to come to their home where they would complete the questionnaires and return them all at one time. Thirty-three or 36.2% of the 91 families allowed the researcher to come to their home or personally deliver the instrument to their homes and retrieve them at a later date or mail them back. Fifty-eight or 63.8% of the 91 families would participate only if the questionnaires were mailed or they lived significant distances from the city of Roanoke which made delivery impractical. Each family was given a questionnaire for each parent and, when agreed upon, eligible adolescents. All members were asked to complete their questionnaire privately. In the case of mailed or delivered/mailed back cases, individual return, pre-addressed, stamped envelopes were also included in the packets. Of the 91 delivered and mailed packets, 73 or 80.2% were returned, 68 or 74.7% of which were complete and used as the actual subject families in the research. All families who failed to return or returned incomplete questionnaires were recontacted to encourage completion, which in some cases included redelivery of questionnaires. The 68 families comprised 36.1% of the 188 families that either agreed or refused to participate, 16.5% of the 411

families contacted, and 13.8% of the original 490 families randomly selected.

### Instrument

The instrument utilized in this research was the Family Adaptability and Cohesion Evaluation Scales III, FACES III, developed by Olson, Portner and Lavee (1985). FACES III is the third version of the FACES scales that were initially developed in 1978 to measure adaptability and cohesion in families, based on Olson's Circumplex Model of family functioning. The original version of FACES included 111 items. FACES III includes 20 items, 10 of which apply to the family cohesion dimension (see Table 1). Two items tap each of five dimensions associated with cohesion: emotional bonding, family boundaries, supportiveness, time and friends, and interest in recreation. The items focus on system characteristics and all family members currently living in the home. Construct validity was measured by factor analysis of the twenty total items, the ten cohesion and ten adaptability items. Cohesion items loaded on factor I and adaptability items primarily on factor II. The correlation between the adaptability and cohesion dimensions on FACES III is almost zero ( $r = .03$ ). There is also a high correlation of the items within each scale with the total scale (see Table 1). The FACES III cohesion score correlates with social desirability at .35. Olson and colleagues (1985) state that because high cohesion is an ideal characteristic in our culture, it is not desirable to reduce the

Table 1  
Cohesion and Adaptability Items and Factor Analysis of FACES III\*

Item	FACTOR ANALYSIS		Correlation of Items
	Factor 1	Factor 2	
FAMILY COHESION			with Cohesion
<u>Emotional Bonding</u>			
11. Family members feel very close to each other.	.60	.01	.67
19. Family togetherness is very important.	.47	-.04	.63
<u>Supportiveness</u>			
1. Family members ask each other for help.	.51	.13	.59
17. Family members consult other family members on their decisions.	.48	.16	.56
<u>Family Boundaries</u>			
7. Family members feel closer to other family members than to people outside their family.	.49	-.16	.59
5. We like to do things with just our immediate family.	.39	-.01	.53
<u>Time and Friends</u>			
9. Family members like to spend free time with each other.	.69	.07	.74
3. We approve of each other's friends.	.43	.03	.51

\*from FACES III, p. 21, by Olson, Portner, and Lavee, 1985.

Table 1 (continued)  
 Cohesion and Adaptability Items and Factor Analysis of FACES III

Item	FACTOR ANALYSIS		Correlation of Items
	Factor 1	Factor 2	
FAMILY COHESION			with Cohesion
<u>Interest in Recreation</u>			
13. When our family gets together for activities, everybody is present.	.54	-.05	.59
15. We can easily think of things to do together as a family.	.43	-.05	.54
FAMILY ADAPTABILITY			with Adaptability
<u>Leadership</u>			
6. Different persons act as leaders in our family.	.07	.35	.47
18. It is hard to identify the leader(s) in our family.	-.22	.38	.48
<u>Control</u>			
12. The children make the decisions in our family.	-.15	.34	.45
2. In solving problems, the children's suggestions are followed.	.15	.37	.42
<u>Discipline</u>			
4. Children have a say in their discipline.	.14	.48	.56
10. Parent(s) and children discuss punishment together.	.28	.37	.47

Table 1 (continued)  
 Cohesion and Adaptability Items and Factor Analysis of FACES III

Item	FACTOR ANALYSIS		Correlation of Items	
	Factor 1	Factor 2		
FAMILY ADAPTABILITY			with Adaptability	
<u>Role and Rules</u>				
8.	Our family changes its way of handling tasks.	-.05	.45	.53
16.	We shift household responsibilities from person to person.	.14	.38	.49
20.	It is hard to tell who does which household chores.	-.20	.34	.46
14.	Rules change in our family.	-.06	.36	.45

correlation between social desirability and cohesion to zero. Reliability was tested by dividing the norm sample of 2412 into two equal groups. Cronbach Alpha figures for cohesion were .76 for sample 1, .75 for sample 2, and .77 overall. The test is easily hand scored and the score then compared to the cutting points of the four levels of cohesion developed for the appropriate norm group (see Table 2). In general, self report measures in family research are found lacking, but Esses and Campbell (1984) suggest utilizing those instruments with demonstrated validity and reliability to study REM families. FACES III is a self report instrument that meets the above qualifications.

#### Analysis of Data

A perceived cohesion score on FACES III was calculated for each individual family member. A total family mean cohesion score was calculated for each REM family by combining and averaging all family member scores within each family. The use of multiple sources within families is being advocated in family research (Esses and Campbell, 1984; Pasley, 1984). There are problems in using mean family scores, especially when there are wide variations between family members scores. At the present point in family research, family mean scores seem to provide the best method of assessing the complexities that using multiple sources within families reflect (Barnes and Olson, 1985; Olson et al., 1985).

Table 2A

Cutting Points and Distributions of FACES III Cohesion Scores for  
Remarried Families and Norm Group Families With Adolescents

Group	Cohesion Levels and Ranges				N
	Disengaged (10-31)	Separated (32-37)	Connected (38-43)	Emmeshed (44-50)	
	Percentage	Percentage	Percentage	Percentage	
Families with Adolescents in the FACES III Norms	18.6	30.3	36.4	14.7	1315
REM Families with Adolescents	9.1	51.5	33.3	6.1	33
REM Families without an Adolescent Questionnaire	20.0	50.0	30.0	0.0	20

Table 2B

Cutting Points and Distributions of FACES III Cohesion Scores for  
Remarried Families and Norm Group Families With Adolescents

Group	Cohesion Levels and Ranges				N
	Disengaged (10-34)	Separated (35-40)	Connected (41-45)	Emmeshed (46-50)	
	Percentage	Percentage	Percentage	Percentage	
General Adult FACES III Norms.	16.3	33.8	36.3	13.6	2453
REM Families without Adolescents	20.0	34.3	40.0	5.7	35
REM Families without Adolescent Questionnaires	14.6	41.6	37.5	6.3	48

Test of the hypotheses all utilized, as the dependent variable, either individual or family mean cohesion scores. Appropriate statistical tests (including dependent and independent T tests, chi square, 3 x 2 factorial ANOVA, and frequency tabulation) were utilized to test each hypothesis. The significance level was set at .05 for all statistical tests.



## Chapter V

### Results and Discussion

Chapter V deals with the results of the tests of the hypotheses and a discussion of these results. The demographic characteristics of the sample and norm group are presented. The results of the statistical test of each hypothesis are presented. The results of each hypothesis are then related to the literature and discussed in the final section of this chapter.

#### Subjects

The final sample consisted of 68 REM families from the Roanoke, Virginia metropolitan area. A total of 136 adults and 28 adolescents completed usable questionnaires. Demographic characteristics of the sample are summarized in Tables 3, 4, 5, and 6.

The REM families were almost evenly divided between the three types. Family mean cohesion scores, that included more than two family members, totaled over 29 percent. Almost half of the families had at least one adolescent living in the home. The families had been together an average of 3.4 years. The couple's courtship lasted an average of 2 days short of one year. Twenty-five percent of the families have had some member involved in counseling since the present remarriage began. The mean number of counseling sessions attended was

Table 3

## Summary of Selected Demographic Characteristics of REM Families\*

Variable	Frequency	Percentage
<u>Family Type</u>		
Complex	24	35.5
Simple/Complex	22	32.25
Simple	22	32.25
Total	<u>68</u>	<u>100.0</u>
<u>Family Returning an Adolescent Questionnaire</u>		
Yes	20	29.4
No	48	70.6
Total	<u>68</u>	<u>100.0</u>
<u>Adolescent in the Home</u>		
Yes	33	48.5
No	35	51.5
Total	<u>68</u>	<u>100.0</u>
<u>Years Married</u>		
One	9	13.2
Two	19	27.9
Three	6	8.8
Four	10	14.7
Five	17	25.0
Six	7	10.4
Total	<u>68</u>	<u>100.0</u>

\*Tabulated from wife's report, following the procedure utilized by Olson et al. (1984).

Table 3 (continued)

## Summary of Selected Demographic Characteristics of REM Families

Variable	Frequency	Percentage
<u>Length of Courtship</u>		
0 - 6 months	9	13.2
6 months - 1 year	23	33.8
1 year - 2 years	21	30.9
2 years - 3 years	3	4.4
3 years - 4 years	6	8.8
4 years - 5 years	5	7.4
8 years - 9 years	1	1.5
Total	68	100.0
<u>Place Home Established</u>		
New Joint Home	30	44.2
Husband's Former Home	29	42.6
Wife's Former Home	9	13.2
Total	68	100.0
<u>Families in which Any Member Has Received Therapy</u>		
Yes	17	25.0
No	51	75.0
Total	68	100.0
<u>Types of Therapy</u>		
Individual Therapy	10	58.8
Marital Therapy	5	29.4
Family Therapy	2	11.8
Total	17	100.0

Table 4  
Summary of Selected Demographic Characteristics of Subjects

Variable	Husband		Wife	
	Frequency	Percentage	Frequency	Percentage
<u>Role in the Family</u>				
Spouse, Stepparent, Natural Parent	32	47.1	35	51.5
Spouse, Stepparent	22	32.3	25	36.7
Spouse, Natural Parent	14	20.6	8	11.8
Total	<u>68</u>	<u>100.0</u>	<u>68</u>	<u>100.0</u>
<u>Number of Marriages</u>				
One	11	16.2	17	25.0
Two	46	67.6	46	67.6
Three	11	16.2	5	7.4
Total	<u>68</u>	<u>100.0</u>	<u>68</u>	<u>100.0</u>
<u>How Well Current Marriage Going</u>				
Very well	49	72.1	55	80.9
Well enough	14	20.5	7	10.2
So, so	3	4.4	4	5.9
Poorly	1	1.5	1	1.5
Very poorly	1	1.5	1	1.5
Total	<u>68</u>	<u>100.0</u>	<u>68</u>	<u>100.0</u>
<u>Previous Marriage Ended by</u>				
Divorce	66	97.1	52	92.8
Death of Spouse	2	2.9	2	3.6
Annulment	0	0	2	3.6
Total	<u>68</u>	<u>100.0</u>	<u>56</u>	<u>100.0</u>

Table 4 (Continued)

## Summary of Selected Demographic Characteristics of Subjects

Variable	Husband		Wife	
	Frequency	Percentage	Frequency	Percentage
<u>Level of Education</u>				
Did not complete high school	9	13.2	4	5.9
Completed high school	20	29.45	34	50.0
Completed some college	20	29.45	20	29.4
Completed 4 years of college	13	19.1	5	7.35
Completed some post graduate	6	8.8	5	7.35
Total	68	100.0	68	100.0
<u>Annual Income (in dollars)</u>				
No income	1	1.5	15	22.1
1-4,999	0	0	4	5.9
5,000-9,999	1	1.5	7	10.3
10,000-14,999	6	8.8	19	27.9
15,000-19,999	20	29.4	14	20.6
20,000-29,000	18	26.5	9	13.2
30,000-39,000	9	13.2	0	0
40,000-49,000	6	8.8	0	0
50,000-74,999	3	4.4	0	0
75,000 or more	4	5.9	0	0
Total	68	100.0	68	100.0
<u>Occupation</u>				
Managerial & Professional	21	30.9	6	8.8
Technical, Sales, & Admin. Support	21	30.9	35	51.5
Service	5	7.4	5	7.4
Production Craft Repairs - Skilled	9	13.1	1	1.5
Operators and Laborers	11	16.2	2	2.9
Homemaker	0	0	19	27.9
Disabled	1	1.5	0	0
Total	68	100.0	68	100.0

Table 5

## Summary of Other Selected Demographic Characteristics of Subjects

Variable	Husband	Wife
<u>Age</u>		
Mean	37.3	32.7
Range	24-59 years	21-60 years
<u>Grade Completed</u>		
Mean	13.5	13.1
Range	8-18 and more	10-18 and more
<u>Length of First Marriage (if applicable)</u>		
Mean	8	6.9
Range	1-20 years	1-30 years
<u>Length of Second Marriage (if applicable)</u>		
Mean	7.2	2.4
Range	1-19 years	1-7 years
<u>Years between Last Marriage and Present Marriage</u>		
Mean	4.7	4.4
Range	1-18 years	1-14 years
<u>Years Single between Last Marriage and Present Marriage</u>		
Mean	3.7	3.4
Range	1-18 years	1-12 years

Table 6  
Summary of Children in REM Families\*

Variable	Frequency	Percentage of Total REM Families	Mean Age
<u>Natural Sons</u>			
One	27	39.7	13.0
Two	7	11.3	13.9
<u>Natural Daughters</u>			
One	28	41.2	13.4
Two	6	8.8	13.5
<u>Natural Sons in the Home</u>			
One	26	38.2	11.8
Two	4	5.9	8.5
<u>Natural Daughters in the Home</u>			
One	22	32.4	12.0
Two	3	4.4	11.3
<u>Stepsons</u>			
One	28	41.2	17.3
Two	13	19.1	17.2
Three	4	5.9	19.0
<u>Stepdaughters</u>			
One	27	39.7	14.1
Two	7	10.3	17.2
<u>Stepsons in the Home</u>			
One	17	25.0	15.1
Two	1	1.5	9.0

\*Tabulated from wife's report.

Table 6 (continued)  
 Summary of Children in REM Families

Variable	Frequency	Percentage of Total REM Families	Mean Age
<u>Stepdaughters in the Home</u>			
One	12	17.6	11.4
Two	2	3.0	8.0
<u>Present Marriage Sons</u>			
One	16	23.5	2.3
<u>Present Marriage Daughters</u>			
One	18	26.5	2.7
Two	2	3.0	2.5



7.58. The average REM family included 3.81 persons in the home. The total average size of the REM families was 4.69 persons. Based upon the wives' reports, 96 percent of their natural children from previous marriages resided in the present home. Forty percent of the wives' stepchildren resided in the present home. The average age of the children who resided in the home was 9.3 years.

Over 50 percent of the women in the sample functioned in the role of wife, mother, and stepmother. Two-thirds of the women were in a second marriage, while one in four were in their first marriage. These women have been married an average of 1.8 times. The vast majority (92.8 percent) of their previous marriages ended in divorce. The women in this sample completed a little over one year of post secondary education. Seventy-two percent of the women in the sample were employed outside the home, 52 percent of these women in sales and clerical positions. Of the women that work, 62 percent earned between 10,000 and 20,000 dollars per year. Eighty-one percent of the women in this sample thought their marriages were going very well.

Forty-seven percent of the men in the sample functioned in the roles of husband, father, and stepfather. Two-thirds of the men were in their second marriage, while one in six were in their first marriage. These men have been married an average of two times. Ninety-seven percent of their previous marriages were ended by a divorce. The men in the sample completed approximately 1.5 years of post secondary education. Thirty-one percent of the men were employed

in professional or managerial positions, while another 31 percent were employed in technical or sales occupations. Fifty-six percent of the men in the sample earned between 15,000 and 30,000 dollars per year. Seventy-two percent of the men reported their marriages were going very well.

The 28 adolescents were almost evenly divided by sex, 15 males and 13 females. The average age of the adolescents in the sample was 14.7 years. The minimum age was 12 and the maximum age was 18. Fifteen of the adolescents lived with their natural mother and stepfather. Fifty-three percent of the adolescents were either the only child in their home or lived with only natural siblings. The other 47 percent lived with natural and stepsiblings or only stepsiblings. Approximately one-third of the adolescents saw their noncustodial natural parent about 3 times per year. Sixty-eight percent saw their noncustodial natural parent at the most 3 times per year.

In summary, the composite picture of the REM families in the study is one of a couple in their mid-thirties with about two children in the home. Both parents have had approximately one year of college education. The father is employed and the mother is probably employed. The mother and father are likely to agree that their marriage is going very well. It is impossible to contrast the REM families in the present research with other REM families because the

demographics of the REM population in the United States are unknown (Esses and Campbell, 1984).

### FACES III Norm Subjects

The FACES III norm group constitutes a national random sample of a nonclinic family population. The demographic profile of this norm group is roughly similar to the profile of the REM family sample of this research except for the factor of remarriage. There were 1140 couples from across all stages of the family life cycle. The sample included 412 adolescents from families in the adolescent stage. The males averaged 46 years of age while the females averaged 43 years of age. The adolescents averaged 16 years of age. Fifty-four percent of the males were employed in professional, managerial, clerical, sales or technical positions. Forty-two percent of the females were employed in similar positions. Forty-two percent of the women were homemakers. The average family income was between 20,000 and 30,000 dollars per year. Sixty-two percent of the men had at least some college, while 52 percent of the women had at least some college. Seventy-seven percent of the couples were highly satisfied with their marriages.

The adults in the norm group were older on the average than those in the REM sample. Fewer individuals in the norm group were employed in professional, managerial, sales, or support positions. More of the women in the norm group were housewives. Though income was compiled by different methods, it appears that average family incomes of the

norm and REM groups are roughly comparable. The percentage of those men and women who completed at least some college is similar in both samples. The percent of subjects in both samples who reported their marriages were going very well was almost identical. The reliability of FACES III, calculated using Cronbach's Alpha, was .77 with the norm subjects and .75 for the REM family sample. In summary, though there are some differences, both the norm and REM samples appear to represent middle class Americans who are satisfied with their marital relationships. The relatively high marital satisfaction levels reported by both REM and norm families are similar to those reported by Weingarten (1980). She reported high satisfaction in 81 percent of her first marriage families and 80 percent of her REM families. The families in her research were from a national survey of adult Americans.

### Test of Hypotheses

Hypothesis 1: Stepparents will perceive and report significantly less cohesion than natural parents in REM families.

A dependent T-test was utilized to test hypothesis 1. The mean and standard deviation for natural parents was 40.6 and 4.92, respectively. The mean and standard deviation for stepparents was 39.6 and 4.63, respectively. The means for both groups fall in the moderate to high, connected cohesion range. The dependent T-test

yielded nonsignificant results ( $t = .103$ ,  $df = 18$ ). Stepparents and natural parents cohesion scores were not significantly different, contrary to what the hypothesis based on the literature suggested. In subsequent analyses family mean scores will be utilized.

Hypothesis 2: REM families, which include adolescents, will report significantly lower levels of cohesion than those REM families that do not include an adolescent.

This hypothesis was tested using three independent T-tests. Because all families with adolescents did not return adolescent questionnaires, three different comparisons were made between the families with adolescents and those without. The three tests involved those families with and without adolescents and those with and without adolescent questionnaires. The means and standard deviations of the family mean cohesion scores according to presence or absence of adolescents and adolescent questionnaires are set forth in Table 7. REM families with an adolescent report significantly lower levels of cohesion than those REM families that do not include an adolescent ( $t = 2.29$ ,  $df = 66$ ,  $p < .05$ ). REM families with an adolescent questionnaire report significantly lower levels of cohesion than those REM families that do not include an adolescent questionnaire ( $t = 3.914$ ,  $df = 66$ ,  $p < .05$ ). REM families with an adolescent questionnaire reported lower levels of cohesion than REM families without an adolescent in the home ( $t = 4.828$ ,  $df = 53$ ,  $p < .05$ ). Each of the three T-tests also were tested for violations of the

Table 7  
 Means and Standard Deviations of Family Cohesion Scores  
 for REM Families According to Adolescence Presence  
 and Presence of Adolescent Questionnaire

Variable	Mean	SD	Frequency
Adolescent in the Home	36.5364	4.5672	33
Adolescent not in the Home	39.2086	4.3261	<u>35</u>
Total			68
Adolescent Questionnaire	34.4700	4.2831	20
No Adolescent Questionnaire	39.3458	3.9704	<u>48</u>
Total			68

homogeneity of variance assumption. None of the three violated the assumption. Hypothesis 2 was supported by the analyses. REM families with adolescents report significantly lower cohesion scores than the REM families without adolescents whether the adolescent(s) perceptions were included in the family cohesion score or not. The REM family literature, which emphasized adolescence as a particularly stressful time during which low levels of cohesion were expected was confirmed. REM families with adolescents mean cohesion score is within the separated (low to moderate) range while REM families without adolescents mean cohesion score is within the connected (moderate to high) range. In subsequent analyses families with adolescents will be compared to the FACES III norms for adolescent families, while other REM families will be compared with the general FACES III norms.

Independent T-tests and chi square goodness of fit tests were utilized to examine hypothesis 3, which was stated as:

Hypothesis 3: REM families will report significantly lower levels of cohesion than intact, first marriage families.

The sample means for the following four analyses are found in Table 7. Those REM families that included an adolescent in the home were compared with the FACES III norms for families with adolescents. The FACES III norm of 37.1 was used as the population mean for a one sample hypothesis T-test. REM families with an adolescent were not significantly different from the FACES III norm families with adolescents ( $t = .709$ ,  $df = 30$ ). The REM families that did not

include an adolescent were compared with the general FACES III norms. The FACES III norm of 39.8 was used as the population mean. REM families that did not include adolescent's cohesion scores were not significantly different from the cohesion scores of the general FACES III norm families ( $t = .808$ ,  $df = 35$ ).

When the REM sample was sorted by presence of adolescent questionnaire a significant result was found. Utilizing the FACES III norm of 37.1 as the population mean, those REM families with an adolescent questionnaire were found to have significantly lower cohesion scores than those FACES III norm families with adolescents ( $t = -2.746$ ,  $df = 19$ ,  $p < .05$ ). The nonadolescent questionnaire REM families mean cohesion score, compared with the FACES III general norm of 39.8, were not significantly lower ( $t = -.792$ ,  $df = 47$ ). Only REM families whose mean cohesion scores included an adolescent's perception were significantly different from the norm group, as the REM literature suggested.

A second set of comparisons concerning Hypothesis 3 were made. The purpose of these comparisons was to determine if the distribution of scores among the four levels of cohesion were different between REM and norm families. A chi square goodness of fit test was completed to compare the distribution of cohesion scores for REM families with adolescents in the home with the norm families with adolescents scores. Table 8A summarizes the significantly different distribution that results. More REM families with adolescents were classified as



Table 8A

Chi-Square Comparison of Distribution of Cohesion Scores  
Between REM Families with Adolescents and  
Norm Families with Adolescents\*

Variable	Observed	Expected	Residual
Disengaged	3	6.14	-3.14
Separated	17	10.00	7.00
Connected	11	12.01	-1.01
Enmeshed	2	4.85	-2.85
Total	33		
$\chi^2 = 8.267$ d.f. = 3      p < .05			

Table 8B

Chi-Square Comparison of Distribution of Cohesion Scores  
Between REM Families with Adolescent Questionnaires  
and Norm Families with Adolescents\*

Variable	Observed	Expected	Residual
Disengaged	4	3.72	.28
Separated	10	6.06	3.94
Connected	6	7.28	-1.28
Enmeshed	0	2.94	-2.94
Total	20		
$\chi^2 = 5.748$ d.f. = 3      p > .05			

\*Expected cell frequencies less than 5 may inflate the calculated chi square. Cochran (1954) states that with df less than 30 and all expected frequencies over 2 use of the ordinary  $\chi^2$  table should suffice.

separated than expected, based on the norm group. Fewer REM families with adolescents were classified in either of the extreme categories of cohesion, disengaged or enmeshed, than expected. The distribution of REM families with no adolescent in the home, when compared with the distribution of the general norm families was not significantly different ( $\chi^2 = 2.029$ ,  $df = 3$ ). The chi square test comparing the distribution of cohesion scores of the REM families with adolescent questionnaires with the distribution of scores of the norm families with adolescents also yielded nonsignificant differences, as can be seen in Table 8B. The observed frequencies were in the hypothesized direction with more REM families with adolescent questionnaires classified as disengaged or separated than expected. The distribution of cohesion scores of REM families without adolescent questionnaires were not found to differ significantly from the distribution of scores of the general norm families ( $\chi^2 = 2.891$ ,  $df = 3$ ).

The literature suggesting that REM family cohesion is lower than intact, first marriage cohesion levels was not entirely supported. Cohesion scores of REM families that do not include adolescents were not found to be significantly different from the norm families contrary to hypothesis three. The mean cohesion score for REM families with adolescents was not significantly different from norm families with adolescents, but the distribution of the same scores was significantly different in the hypothesized direction. The mean cohesion score for REM families with adolescent questionnaires was

significantly different from norm families with adolescents. The distribution of these scores was not significantly different, though it was in the hypothesized direction.

Hypotheses 4 and 5 were tested together in a 3 x 2 factorial analysis of variance.

Hypothesis 4: The more complex the REM family structure the lower the level of perceived cohesion. The simple/complex type will yield the lowest cohesion levels, followed by the complex and simple types.

Hypothesis 5: There will be no difference between the reported levels of cohesion in REM families together three years or less and those together more than three years.

The means and standard deviations of the family cohesion scores of the different breakdowns of the REM families with adolescents according to length of marriage and family type are found in Table 9A-D.

The three family types (complex, simple/complex, and simple) comprised the levels of one independent variable and years married (3 years or less, more than 3 years) comprised the levels of the second independent variable. The ANOVA was carried out four times, with families with adolescent questionnaires, with families without adolescent questionnaires, with families with adolescents, and with families without adolescents. There were no significant main effects

Table 9A

Means and Standard Deviations of the Family Cohesion Scores  
for REM Families with Adolescent Questionnaires and  
Those without Adolescent Questionnaires According  
to the Number of Years Married

Years Married	Adolescent Questionnaire			No Adolescent Questionnaire		
	Frequency	Mean	SD	Frequency	Mean	SD
3 Years or Less	11	34.33	4.22	23	39.70	3.73
More than 3 Years	9	34.63	4.59	25	39.02	4.22
Total	<u>20</u>			<u>48</u>		

Table 9B

Means and Standard Deviations of the Family Cohesion Scores  
for REM Families with Adolescent Questionnaires and  
Those without Adolescent Questionnaires According  
to the Family Type

Family Type	Adolescent Questionnaire			No Adolescent Questionnaire		
	Frequency	Mean	SD	Frequency	Mean	SD
Complex	7	35.91	4.86	17	39.50	4.08
Simple/Complex	7	32.07	4.68	15	38.63	3.75
Simple	6	35.58	1.57	16	39.85	4.20
Total	<u>20</u>			<u>48</u>		

Table 9C

Means and Standard Deviations of the Family Cohesion Scores  
for REM Families with Adolescents in the Home and  
Those without Adolescents According  
to the Number of Years Married

Years Married	Adolescent Questionnaire			No Adolescent Questionnaire		
	Frequency	Mean	SD	Frequency	Mean	SD
3 Years or Less	14	35.64	4.04	20	39.59	4.34
More than 3 Years	19	37.19	4.91	15	38.70	4.40
Total	<u>33</u>			<u>35</u>		

Table 9D

Means and Standard Deviations of the Family Cohesion Scores  
for REM Families with Adolescents in the Home and  
Those without Adolescents According  
to the Type of Family

Family Type	Adolescent Questionnaire			No Adolescent Questionnaire		
	Frequency	Mean	SD	Frequency	Mean	SD
Complex	14	37.24	4.62	10	40.15	4.02
Simple/Complex	7	34.61	6.03	15	37.44	4.45
Simple	12	36.83	3.52	10	40.91	3.78
Total	<u>33</u>			<u>35</u>		

for type of REM family ( $F = 1.72$ ,  $df = 2/14$ ,  $p > .05$ ), number of years married ( $F = .214$ ,  $df = 1/14$ ,  $p > .05$ ), or significance for the interaction between type of REM family and number of years married ( $F = .374$ ,  $df = 2/14$ ,  $p > .05$ ) for REM families with adolescent questionnaires. The ANOVA carried out with families without adolescent questionnaires also disclosed no significant main effects ( $F = .344$ ,  $df = 4/42$ ,  $p > .05$ ) ( $F = .364$ ,  $df = 1/42$ ,  $p > .05$ ) or interaction effects ( $F = .205$ ,  $df = 2/42$ ,  $p > .05$ ). ANOVA's carried out with families with adolescents and those without adolescents also disclosed no significant main effects ( $F = .744$ ,  $df = 2/27$ ,  $p > .05$ ) ( $F = .826$ ,  $df = 1/27$ ,  $p > .05$ ), ( $F = 2.13$ ,  $df = 2/29$ ,  $p > .05$ ) ( $F = .130$ ,  $df = 1/29$ ,  $p > .05$ ) respectively. No significant interaction effects were found in these last two ANOVA's ( $F = .538$ ,  $df = 2/27$ ,  $p > .05$ ) ( $F = .130$ ,  $df = 2/29$ ,  $p > .05$ ) respectively.

Hypothesis 4, based upon the REM family literature, was not supported by the present research findings. There were no significant differences between different types of REM family structure. Simple/complex families did report the lowest cohesion scores, with complex next among families without adolescents and adolescent questionnaires. The simple family type recorded the second lowest scores among families with adolescents and adolescent questionnaires.

The REM literature presented a conflicting picture of the number of years married and levels of cohesion. Hypothesis 5, based upon the literature, was supported by the present research. There were no

significant differences between families together 3 or fewer years and those together more than 3 years, regardless of presence or absence of adolescents or adolescent questionnaires. The trend was present among those REM families with adolescents or adolescent questionnaires together 3 or less years to report lower cohesion. The reverse trend was present among those families without adolescents or adolescent questionnaires.

### Discussion

Data from the present study yielded both expected and unexpected findings. The literature concerning the differences of perception of cohesion between stepparents and natural parents clearly suggested that stepparents should experience less cohesion. The finding of this study was that, though stepparents' cohesion scores were lower, the difference was nonsignificant. This finding may suggest that the perceptions of natural parents and stepparents depend more on individual family dynamics than any broad statements concerning roles in general. Clingempeel's (1981) study of REM marital quality may also speak to this issue. He found a correlation between lower marital quality and lower cohesion. The couples in this study generally agreed upon and reported very positive feelings about their marriages (see Table 4). Possibly, these feelings affected their perceptions of cohesion, more likely resulting in agreement.

The second hypothesis, that REM families containing adolescents would report lower cohesion than nonadolescent REM families, was

strongly supported. It made no difference if the adolescents' cohesion was calculated in the family mean score or not. This finding paralleled Olson and colleagues (1985) finding among their norm families and supported the REM family literature, empirically validating what had only been clinically purported previously. This finding validates the notion that family developmental stages are important and should be considered in REM families as well as other family types. Adolescence, particularly, has been identified as an important stage in family development. The findings of the present study support the clinical reports that identify the importance of the adolescent stage in REM families.

The results of analyzing hypothesis 3 also have ramifications for REM families with adolescents. Hypothesis 3 stated that cohesion levels in REM families would be lower than those found in intact first marriage families. The hypothesis was supported concerning REM families with adolescents but not for other REM families. The family mean cohesion score was significantly different from norm families for REM families with adolescent questionnaires and not for those with the adolescent in the home. Analyzing the data, using chi square test to examine the distribution of scores, yielded opposite results, the adolescent in the home families' scores were significantly different, while the adolescent questionnaire families were not. Utilizing the two different types of analysis validates the claim that mean scores used to analyze multiple source family data may not result in a



complete representation of the data (Barnes and Olson, 1985). Considering the results of the chi squares and t-tests, the fact that REM families with adolescents are different from nonREM families with adolescents emerges. REM families without adolescents were not found to have lower cohesion scores than the norm families. In light of this finding the adolescent difference is even more significant. The added complexity that the different developmental needs of adolescents and REM families create results in less family cohesion. Adolescents in the family seem to make the difference in family cohesion, not the fact that the family is REM or nonREM. The Circumplex hypothesis that accounts for developmental change seems to be supported. The REM literature that focuses upon other potential stressors and cohesion was not supported by this research. The fact that the REM families in this sample reported satisfaction with their marriages and are not a clinical population may also have contributed to the lack of significant differences. The fact may well be that successful REM families' cohesion is not different from intact first marriage families' cohesion except during the adolescent stage, when lower cohesion is found in REM families. It would appear that, at least in the adolescent stage of family development, lower cohesion is more functional in successful REM family life than in nonREM family life.

Hypothesis 4 was not supported in this research. Hypothesis 4 stated that the more complex the REM family structure the lower the

reported cohesion levels would be. Though not statistically significant, there was a trend in the hypothesized direction. Simplex/complex families did report lower cohesion than the other two types. The reviewed REM family literature did not directly deal with the issue of family type. The hypothesis was primarily based on the idea that more permeable boundaries were needed in more complex families, particularly those families with children moving in and out. The fact may well be that more permeable boundaries are needed, but this aspect of cohesion alone did not significantly lower the cohesion score. Boundaries are important to cohesion but may not be the pivotal aspect as opposed to the other dimensions, particularly emotional bonding. The previously mentioned facts, that marital satisfaction was high and these REM families seem to basically be functioning well, may diminish the possible effects of family complexity. The findings concerning this hypothesis may also support the suggestion, made concerning hypothesis 3, that successful REM families handle most stressors without their cohesion being seriously affected. No interaction between family type and years together was found in the factorial ANOVA. This finding seems to indicate that these, basically successful, REM families handle the potential stress that more complex family types could cause to their cohesion well, regardless of how long they have been in a REM family.

The final hypothesis concerned time in the REM family. Because of the conflicting picture the literature provided the hypothesis was

stated nondirectionally, that time in the REM family would not affect cohesion. This hypothesis was supported. When divided, as some of the literature suggested, at 3 years, as well as when analyzed by individual years, no significant differences were found. It would appear that, at least as far as cohesion is concerned, time in the REM family is not a significant factor. If it is a significant factor then the various dynamics that may be occurring at different stages of remarriage, such as pseudo mutuality in initial stages, may indeed have balancing effects which cancel each other out over the 6 year span studied.

#### Methodological Implications

There are several methodological limitations which should be discussed. The sample in this research was relatively small. The statistically nonsignificant results where trends in the expected directions emerged may have proven significant with an increased sample size. On the other hand, the findings that were significant may be taken as even more compelling given the relatively small sample size.

The fact that adolescent questionnaires were not completed by all adolescents could very well have affected the results. There may be some particular characteristic(s) of those families that did or did not allow their adolescents to complete questionnaires or those adolescents who did or did not complete their questionnaires that biased the results in some unknown manner. All analyses that included

adolescents were conducted with both families with adolescents in the home and adolescent questionnaires to attempt to address this possible confounding problem.

There may also be some unknown factor that may have affected the results, arising from the low (36 percent) response rate based upon the number of refusals and failure to return versus completed questionnaires. The high (75 percent) response rate from those who agreed to participate does not diminish the possibility that there may be some important characteristics in those who participated and those who did not. For instance, the families that did not participate may be significantly less satisfied with their family than those families that participated.

The use of a multimethod approach may have provided alternative means to uncover significant results. The use of qualitative methods, particularly an observational method, could have complemented the questionnaire utilized. Limitations on time and personnel precluded using an observational approach. Using multimethods would have allowed for multiple dependent measures and use of multivariate analyses. These methods are usually more powerful procedures, which could have led to more significant results. Qualitative methods could have provided a richer more detailed exploration of cohesion in REM families.

### Theoretical Implications

There are a number of theoretical implications that can be gleaned from the results of this study. The portion of the Circumplex Model concerning family cohesion changing in response to changes in the family life cycle was supported in this research.

REM family theory has stated that REM family development is different and that different normative expectations should be made. The Circumplex Model states that different normative expectations may affect cohesion in families. The findings from this research support the theory that the adolescent family developmental stage is different in REM families but does not support any other stage, that includes children in the home, as different. The broad claims concerning the differences between REM families and nonREM families appear to be overstated as far as cohesion is concerned. Increasing the sample size and purposely dividing the sample into developmental stages would allow for more detailed exploration of REM family development as opposed to other families' developmental stages.

The present study was conducted with a nonclinic population. Most of the published literature concerning REM families is based upon clinic populations and generalized to include nonclinic REM families. The fact that the results of the study did not support hypotheses derived, largely from this clinical literature, underlines the importance of focusing on normal populations. The study of clinical populations has provided invaluable insight into individual and family

dynamics, but exclusive reliance on clinical experience to provide insight into nonclinic families is inadequate.

In conclusion, the present study, despite its methodological limitations, provides some insights into REM family life. REM families with adolescents report lower levels of cohesion than other REM families and other types of families with adolescents. Cohesion levels in the separated, low to moderate range, appear to be adaptive in REM families with adolescents. Lower levels of cohesion than in other types of families do not appear to be the case for REM families that do not include adolescents. It is important to note that even though significant differences exist within and between the norm and REM family groups, all of the mean cohesion scores for each group fall within the balanced range of the Circumplex Model, predominantly in the separated range. The fact that low to moderate levels of cohesion seem to be the norm for REM families supports the REM family literature. The findings of this research do not support the suggestion in the literature that REM families have significantly lower cohesion levels than intact first marriage families, except among families with adolescents. The curvilinear aspect of cohesion addressed in the Circumplex Model therefore is of little consequence when attempting to understand nonclinic REM families. Stepparents and natural parents do not tend to differ in the amounts of cohesion they perceive in their families. Variables such as length of time in the REM family and complexity of structure of the REM family do not appear

to affect the cohesion in REM families. The results of this study have illustrated the need for empirically testing clinical insights and have laid the groundwork for further exploring the different dimensions of functional REM family development.

## Chapter VI

### Summary

The purpose of the present study was to examine family cohesion in REM families. A review of the available literature concerning REM families clearly identifies cohesion as an important dimension. The majority of the literature is authored by clinicians and is based upon experience working with dysfunctional REM families, not empirical research. Cohesion has been identified in the literature as an important factor in positive REM family functioning. The need to develop a body of knowledge concerning positive functioning in REM families has been identified as important because of the inappropriateness of conceptualizing REM families as similar to intact, first marriage families. The research was designed to compare cohesion in REM families with a norm group of intact families, as well as investigate the effects of specified variables on family cohesion in REM families, in an attempt to begin to develop an empirical basis for better understanding positive REM family functioning in nonclinic families.

Based upon the literature on REM families and the Circumplex Model of family functioning, five hypotheses were derived. The first hypothesis suggested that stepparents would report lower levels of cohesion than natural parents. The second hypothesis stated that REM



families with adolescents would report lower levels of cohesion than nonadolescent REM families. It was hypothesized in hypothesis three that REM families would report lower levels of cohesion than nonREM families. Hypothesis four suggested that more complex types of REM families would report less cohesion than less complex REM family types. The final hypothesis stated that there will be no difference between the reported levels of cohesion in REM families together three years or less and those together more than three years.

A sample of 68 REM families currently living in the Roanoke, Virginia metropolitan area completed the self administered questionnaire. The 68 families comprised 74.7 percent of those who verbally agreed to complete the questionnaire, 36.1 percent of those contacted or either agreed or refused to participate, and 13.8 percent of the original random sample of 490 families with whom contact was attempted. The questionnaire included demographic items as well as the Family Adaptability and Cohesion Evaluation Scales III (FACES III), to measure cohesion.

All tests of the hypotheses utilized either individual or family mean FACES III cohesion scores as the dependent measure. Appropriate statistical test (including dependent and independent T-tests, chi square, 3 x 2 factorial ANOVA, and frequency tabulations) were used to test each of the five hypotheses regarding REM family cohesion.

The results did not confirm that stepparents and natural parents cohesion scores differed significantly. The results did confirm that REM families with adolescents cohesion levels were lower than the cohesion levels of other REM families. REM families with adolescents were found to have lower levels of cohesion than nonREM families with adolescents. REM families in other life cycle stages levels of cohesion were not found to be significantly lower than nonREM families' cohesion levels, contrary to the hypothesis of this research. Complexity of the REM family structure, as denoted by number and type of sets of children in the home, was not a significant variable in cohesion levels, contrary to expected results. There was a trend in the expected direction, as the most complex type of family did result in the lowest mean family cohesion score. As expected, the number of years in the REM family did not significantly affect the reported levels of cohesion in REM families. The interaction between family type and years in the relationship was not significant. All results that were significant were so at the .05 level.

Generally, REM families with adolescents emerged as the REM family type in which levels of cohesion are significantly different from other family types. The results serve as a beginning in the investigation of cohesion in REM families. They also contribute to a better understanding of nonclinic, REM family life. The importance of empirically testing clinically based theory was confirmed. Further research concerning adaptive REM family process is advocated to develop a clearer understanding of how REM families function.

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APPENDIX A  
Questionnaires Sent to Family Members



## Page One of the Adult and Adolescent Questionnaire

COLLEGE OF HUMAN RESOURCES



## VIRGINIA POLYTECHNIC INSTITUTE AND STATE UNIVERSITY

Blacksburg, Virginia 24061 - 8299

DEPARTMENT OF FAMILY AND CHILD DEVELOPMENT (703) 961-4794 or 4795

## REMARIED FAMILY QUESTIONNAIRE

PLEASE COMPLETE EVERY QUESTION IN THE QUESTIONNAIRE. PLEASE COMPLETE YOUR QUESTIONNAIRE PRIVATELY, WITHOUT THE HELP OF ANY OTHER FAMILY MEMBER. IF YOU WISH, YOU MAY DISCUSS THE QUESTIONNAIRE WITH OTHER FAMILY MEMBERS, AFTER ALL FAMILY MEMBERS HAVE COMPLETED AND RETURNED THEIR QUESTIONNAIRES. THANK YOU FOR YOUR COOPERATION.

## PART A

PLEASE RESPOND TO EACH STATEMENT BY PLACING A CHECK IN THE COLUMN WHICH APPLIES MOST CLOSELY TO HOW YOU WOULD DESCRIBE YOUR FAMILY NOW. THERE ARE NO RIGHT OR WRONG ANSWERS. THE RIGHT ANSWER IS WHAT IS TRUE FOR YOUR FAMILY.

	ALMOST NEVER	ONCE IN A WHILE	SOME- TIMES	FRE- QUENTLY	ALMOST ALWAYS
1. Family members ask each other for help. In solving problems, the children's					
2. suggestions are followed.					
3. We approve of each other's friends.					
4. Children have a say in their discipline.					
5. Different persons act as leaders in our family. We like to do things with just our					
6. immediate family.					
7. Family members feel closer to other family members than to people outside the family.					
8. Our family changes its way of handling tasks. Family members like to spend free time with					
9. each other.					
10. Parents and children discuss punishment together.					
11. Family members feel very close to each other.					
12. The children make the decisions in our family. When our family gets together for activities,					
13. everybody is present.					
14. Rules change in our family. We can easily think of things to do together					
15. as a family.					
16. We shift household responsibilities from person to person.					

## Page Two of the Adult and Adolescent Questionnaire

	ALMOST NEVER	ONCE IN A WHILE	SOME-TIMES	FRE-QUENTLY	ALMOST ALWAYS
Family members consult other family members 17. on their decisions.					
18. It is hard to identify the leader(s) in our family.					
19. Family togetherness is very important. It is hard to tell who does					
20. which family chores.					

## PART B

PLEASE RESPOND TO EACH STATEMENT BY PLACING A CHECK IN THE COLUMN WHICH APPLIES MOST CLOSELY TO HOW YOU IDEALLY, WOULD LIKE YOUR FAMILY TO BE. THERE ARE NO RIGHT OR WRONG ANSWERS. THE RIGHT ANSWER IS WHAT YOU WISH FOR IN YOUR FAMILY.

	ALMOST NEVER	ONCE IN A WHILE	SOME-TIMES	FRE-QUENTLY	ALMOST ALWAYS
1. Family members would ask each other for help.- In solving problems, the children's					
2. suggestions would be followed,					
3. We would approve of each other's friends. The children would					
4. have a say in their discipline. We would like to do things					
5. with just our immediate family. Different persons would act					
6. as leaders in our family Family members would feel closer to each other					
7. than to people outside the family. Our family changes its					
8. ways of handling tasks. Family members would like to spend					
9. free time with each other. Parent(s) and children would					
10. discuss punishment together. Family members would feel					
11. very close to each other. Children would make					
12. the decisions in our family. When our family is together,					
13. everybody would be present.					
14. Rules would change in our family. We could easily think of things					
15. to do together as a family. We would shift household responsibilities					
16. from person to person. Family members would consult each					
17. other on their decisions. We would know who the leader(s)					
18. was in our family.					
19. Family togetherness would be very important.					
20. We could tell who does which house hold chores.					

## Page Three of the Adult Questionnaire

## PART C

PLEASE PROVIDE SOME ADDITIONAL INFORMATION NEEDED TO HELP INTERPRET THE RESULTS OF THE STUDY.

1. What is your age today? \_\_\_\_\_ (years)
2. How long have you been in your present marriage? \_\_\_\_\_ (years) \_\_\_\_\_ (months)
3. In your family of remarriage which roles do you fill? (Check one)
 

<input type="checkbox"/> Stepmother, mother, and wife	<input type="checkbox"/> Father, and husband
<input type="checkbox"/> Stepfather, father, and husband	<input type="checkbox"/> Stepmother, and wife
<input type="checkbox"/> Mother, and wife	<input type="checkbox"/> Stepfather, and husband
4. How many times have you been married, counting your present marriage? \_\_\_\_\_  
(If you have been married only once, skip 5,6,7,8 designated by \*\*).
- \*\*5. How long were you married to your previous spouse(s)? 1 \_\_\_\_\_ 2 \_\_\_\_\_  
(years)
- \*\*6. How did your previous marriage(s) end? (Check all that apply)  
 Death of spouse  Divorce  Annulment  Not previously married
- \*\*7. How many years have passed since your former marriage ended and your present marriage began? \_\_\_\_\_ Not applicable (N/A) \_\_\_\_\_ (years)
- \*\*8. How long were you single between the end of your former marriage and the beginning of your present marriage? \_\_\_\_\_ (N/A) \_\_\_\_\_ (years)
9. How much time was there between the establishment of a serious relationship with your present spouse and marriage? \_\_\_\_\_ (years) \_\_\_\_\_ (months)
10. Upon or after your remarriage did you: (Check one)  
 Establish a new joint home.  Establish your home in your spouses former home.  Establish your home in your former home.
11. What are the ages and sex of your NATURAL children from former marriages?  
 (Place age in blank) Males \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
 Females \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_
12. How many of your NATURAL children from former marriages presently live with you at least half the time? Males \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
 (Place age in the blank) Females \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_
13. What are the ages and sex of your STEPCHILDREN from this marriage?  
 (Place age in blank) Males \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
 Females \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_
14. How many of your STEPCHILDREN from this marriage presently live with you at least half the time? Males \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
 (Place age in the blank) Females \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_
15. What are the ages and sex of the children born to you and your present spouse?  
 (Place age in the blank) Males \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
 Females \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_
16. Have you or any member of your current household sought professional help to deal with any problems since you began your present marriage? \_\_\_\_\_ (yes)  
 \_\_\_\_\_ (no) (If no skip 17)

Page Four of the Adult Questionnaire

17. What type of help has been utilized? (Check all that apply)

- Individual counseling for \_\_\_ sessions
- Marital counseling for \_\_\_ sessions
- Family counseling for \_\_\_ sessions
- Family or couples group for \_\_\_ sessions
- Other (Explain) \_\_\_\_\_ for \_\_\_ sessions

18. What grade did you complete in school? (Circle highest) 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 More \_\_\_\_\_

19. What is your most common occupation? \_\_\_\_\_  
Examples: farmer, housewife, lawyer, salesman, clerk. Please be specific.

20. What is your current individual annual income, before taxes? (Check one)  
 No income     1-4,999     5,000-9,999     10,000-14,999  
 15,000-19,999     20,000-29,999     30,000-39,999  
 40,000-49,999     50,000-74,999     75,000 and over

21. How well is your current marriage going? (Check one)  
 Very well     Well enough     So,so     Poorly     Very poorly

22. Concerning stepchildren and discipline, a stepparent should usually: (Check one)  
 not become involved.     support the natural parent's actions but stay out of direct discipline.     support the natural parent's actions and help enforce them.     share equally with the natural parent disciplinary decisions and enforcement.

ONLY ANSWER 23 IF YOU ARE A STEPPARENT

23. Concerning stepchildren and discipline, as a stepparent I have usually:  
(Check one)  Not become involved,  supported my spouse's actions but stayed out of direct discipline.     supported my spouse's actions and helped enforce them.     shared equally with my spouse disciplinary decisions and enforcement.

IS THERE ANYTHING ELSE YOU WOULD LIKE TO TELL ME ABOUT WHAT LIFE IS LIKE AS A PARENT IN A REMARRIED FAMILY? IF SO, PLEASE FEEL FREE TO COMMENT BELOW OR ON AN ADDITIONAL SHEET OF PAPER.

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THANK YOU FOR YOUR HELP. YOUR CONTRIBUTION TO THIS RESEARCH IS GREATLY APPRECIATED. WOULD YOU LIKE A SUMMARY OF THE RESULTS?  (YES)  (NO)

## Page Three of the Adolescent Questionnaire

## PART C

PLEASE PROVIDE SOME ADDITIONAL INFORMATION NEEDED TO HELP INTERPRET THE RESULTS OF THE STUDY.

1. How old are you today? \_\_\_\_\_ (years)
2. I am a: (Check one) \_\_\_\_\_ Male \_\_\_\_\_ Female
3. In the place where you live most of the time, do you have: (Check all that apply) \_\_\_\_\_ A mother and stepfather \_\_\_\_\_ A father and stepmother \_\_\_\_\_ Only natural brothers and sisters \_\_\_\_\_ Natural and step brothers and sisters \_\_\_\_\_ Only step bothers and sisters \_\_\_\_\_ Other(Explain) \_\_\_\_\_  
 \_\_\_\_\_ (Examples: Grandparents, Stepgrandparent)
4. Concerning stepchildren and discipline, a stepparent should usually: (Check one) \_\_\_\_\_ not become involved. \_\_\_\_\_ support the natural parent's actions but stay out of direct discipline. \_\_\_\_\_ support the natural parent's actions and help enforce them. \_\_\_\_\_ share equally with the natural parent disciplinary decisions and enforcement.
5. Concerning the discipline I receive, my stepparent usually: (Check one) \_\_\_\_\_ is not involved. \_\_\_\_\_ supports my natural parent's actions but stays out of directly disciplining me. \_\_\_\_\_ supports my natural parent's actions and helps enforce them. \_\_\_\_\_ shares equally with my natural parent disciplinary decisions and enforcement.
6. Since my parent has remarried I: (Check one) \_\_\_\_\_ spend more time with friends. \_\_\_\_\_ spend about the same amount of time with friends. \_\_\_\_\_ spend less time with friends.
7. Since my parent has remarried I: (Check one) \_\_\_\_\_ go out on dates more often. \_\_\_\_\_ go out on about the same number of dates. \_\_\_\_\_ go out on dates less often.
8. Since my parent remarried: (Check one) \_\_\_\_\_ my school grades have improved. \_\_\_\_\_ my school grades are about the same. \_\_\_\_\_ my school grades are not as good.
9. Since my parent remarried I: (Check one) \_\_\_\_\_ feel down less often. \_\_\_\_\_ feel down about the same as before. \_\_\_\_\_ feel down more often.
10. Since my parent remarried I: (Check one) \_\_\_\_\_ participate in more extracurricular activities. \_\_\_\_\_ participate in about the same number of extracurricular activities. \_\_\_\_\_ participate in fewer extracurricular activities.
11. Since my parent remarried I: (Check one) \_\_\_\_\_ have less conflict with him or her. \_\_\_\_\_ have about the same amount of conflict with him or her. \_\_\_\_\_ have more conflict with him or her.
12. Since my parent remarried I: (Check one) \_\_\_\_\_ feel closer to him or her. \_\_\_\_\_ feel about as close to him or her as I did before. \_\_\_\_\_ feel more distant from him or her.
13. How often do you usually see your natural parent you do not live with? (Check one) \_\_\_\_\_ Natural parent is deceased. \_\_\_\_\_ Never \_\_\_\_\_ Not more than once a year \_\_\_\_\_ Not more than three times a year \_\_\_\_\_ Monthly \_\_\_\_\_ Twice monthly \_\_\_\_\_ Weekly \_\_\_\_\_ Two or more times per week \_\_\_\_\_ Other(Explain) \_\_\_\_\_

Page Four of the Adolescent Questionnaire

IS THERE ANYTHING ELSE YOU WOULD LIKE TO TELL ME ABOUT YOUR LIFE IN A REMARRIED FAMILY? IF SO, PLEASE DO SO BELOW IN THE SPACE PROVIDED OR ATTACH A SEPERATE SHEET OF PAPER.

THANK YOU FOR YOUR HELP. YOUR RESPOSES WILL ALLOW US TO LEARN MORE ABOUT ADOLESCENTS IN REMARRIED FAMILIES.

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