For the past several decades, the study of families under stress – both research and theory – has been geared towards understanding the conditions under which families manage stressful events and transitions, or the conditions under which they become disorganized. Only scant attention has been paid to the effect of stressful situations on subsystems within the family or to interpersonal processes under stress. The purpose of the present article is to draw attention to the effect that stressful situations may have on the marital dyad. In order to understand marital relationships under stress, I will attempt to integrate general propositions from family stress theory with interpersonal processes described by family systems theory and by attachment theory.

The paper is divided into three parts. In the first part, I will discuss family stress theory as it relates to marital (sub)systems. I will argue that family stress theory, for the most part, has ignored the marital system as a unit of analysis. In the second part, I will review research on marriages under stress, with an attempt to document its scope and to relate the findings to family stress theory. I will then discuss some research findings that are not well addressed by family stress theory. In so doing, I will argue that we need to go beyond the A, B, C, and X factors in order to understand interpersonal relationship processes and outcomes under stress. In the third part, I will discuss relationship processes under stress from the perspective of systems theory and attachment theory, coupled with some implications and directions for future research.

Two notes are in order before we begin. First, although I focus my discussion on the marital unit, the processes discussed here may just as well be valid for other forms of committed relationships, including cohabiting and gay/lesbian couples. Second, I do not intend, at this point in time, to offer a comprehensive model of relationships under stress, but rather to direct attention to some significant interpersonal relationships in times of stress.

Family Stress Theory and Marital Relations

This group (TCRM) needs no introduction to family stress theory. The theory has drawn frequent discussions at this Workshop for the past two decades, with many examples of its application, critique of various components, definitional clarifications, suggested revisions, and discussion of additional propositions. The ABCX model has guided hundreds of studies over the past five decades, as well as dozens of essays on its application for intervention with families under a broad range of stressful situations. It is assumed that this group is familiar with the ABCX theory of family stress and crisis, as well as with the invaluable contribution of family scholars who have synthesized the various components of the theory (Hansen & Johnson, 1979), expanded it to accommodate changes over time (Boss, 1987), and broadened its scope to matters of context and meaning. Over the years, many other important contributions have been made at this Workshop and published in family journals.

Despite numerous scholarly writings, the basic assumptions and the major components of the theory have not changed over the years. Nearly all research in this area continue to be guided by the A, B, C, and X components of the model, theorizing (and most often supporting the hypothesis) that the extent of family crisis (variously operationalized in terms of strain, disorganization, dysfunction, dissatisfaction, etc.) or adaptation can be predicted by the precipitating event(s), by family perception of the situation, and by the resources available to the family.

The continued reliance on the ABCX or Double-ABCX models in family stress research attest to its strength: It is simple, relatively easy to operationalize and test, and is useful for explaining a wide range of situations affecting the family – both normative transitions and unexpected, non-normative or
traumatic events. Even well-articulated and reasoned critiques of the model – or of research guided by it – have not altered the line of research in this area. For example, the definitional and operationalization problems in studying “family perception of the situation,” “family resources,” or “family coping” have (Menaghan, 1983a; Walker, 1985; Boss, 1987) often been acknowledged by family researchers, but have not made a significant impact on the research of families under stress. Two characteristics of the model provide for its strength, yet bear some limitations: (1) It rests on a positivistic approach, and (2) its propositions are abstract enough to include all family phenomena under stress.

From a positivistic approach, the theory attempts to predict, in a deterministic and causal manner, the factors that account for the family’s adaptation or crisis when faced with an event that has the potential to create a disruption in the family’s normal (routine) mode of operation. In the past two decades, various non-deterministic, non-linear, and systemic processes have been suggested as operating in families under stress (Boss, 1977, 1988; Hansen & Johnson, 1979; stress . McCubbin, 1979; McCubbin & Patterson, 1982) note, however, that these (1994)Burr and Klein systemic formulations may not have been integrated because they conflicted with the basic assumptions of the theory. As noted before, the strength of the positivistic nature of the model is that it is simple to understand and easy to test. It also fits well with linear statistical reasoning and is therefore easy to employ in data analysis of quantitative research. The weakness lies primarily in that interpersonal interactions are ignored altogether. Thus, the ABCX model allows the prediction and explanation of long-term outcomes, but it does not allow an understanding of the systemic processes that take place when the family faces a stressful event.

The generalized nature of the ABCX is most apparent by its focus on the family as a total unit. A (Boss, 1987; Menaghan, 1983a; Walker, few scholars have stressed the need to consider subsystems 1985) within the family, as well as systems larger than the family unit. It is interesting to note, however, that the marital unit – as central as it is in the family’s functioning – has received almost no attention at all. In family stress theory, only a few dyadic variables have been considered (e.g., marital adjustment, relative conjugal power, amount of consultation, amount of similarity of sentiments; see Burr, 1973), but they are theorized as mediating factors, namely, as determinants of the family regenerative power. Apparently, none of the family stress formulations has attempted to explain or describe marital interactions under stress or the effect of stress on marital relationships.

In some respects, the theory – in its generalized formulation as family stress – may be adequate for explaining marital relations under stress (cf., Williams, 1995a). Presumably, if we substitute the term ‘family’ with ‘marital,’ ‘couple,’ or ‘dyadic,’ then propositions of family stress theory may just as well be valid for explaining marriages under stress. Indeed, as will be shown below, much of what we know about marriages under stress may be explained by components of family stress theory. It appears, however, that the theory helps us very little to really know what transpires in couples under stress.

A recent attempt both to break out of the positivistic approach to studying families under stress and to document the effect of stress on various subsystems has been conducted by Burr, Klein, and their associates (Burr & Klein, 1994). These researchers developed an eco-systemic theory based on a series of studies regarding the effect of various stressful situations on different aspects of the family, including coping efforts of and effect on the marital unit. With respect to the marital unit, the researchers documented changes in family functioning and marital satisfaction along stages of the family’s coping process. The authors concluded that “considerably more variation is seen in the way family systems respond to stress than is generally recognized in the stress literature” (Burr & Klein, 1994, p. 123). Unfortunately, they were unable to advance our understanding of these various patterns. While documenting the effect of different levels of stress, various coping patterns, and various outcomes, they fell short of explaining why and how couples respond to stress in certain ways. Furthermore, while their research was contextual and systemic, their new theory continues to formulate the stress process in terms of general principles and to explain the stress and coping process in terms of the overall family unit.

More recently, Karney and Bradbury (1995) reviewed both theory and research pertaining to changes in marital quality (and stability) over time. They concluded that crisis theory addresses some important aspects of marital relationship change that are not well explained by other theories (social exchange, behavior, and attachment theories), since it offers a means of predicting when declines in marital satisfaction are likely to occur. Crisis theory was critiqued, however, for its failure to specify the mechanisms of change, in that the constructs of this theory have not been linked to specific processes within the marriage.
In response to the limitations of existing theories in specifying marital change, Karney and Bradbury (1995) presented a vulnerability-stress-adaptation model which posits that stressful events, combined with the couple’s enduring vulnerabilities, explain adaptive processes, which in turn affect and are affected by marital quality. The couple’s enduring vulnerabilities is an important construct in this model. It refers to background variables and traits that spouses bring to the marriage, such as perception of the family of origin, attitude toward marriage, social skills, personality, and level of education. Karney and Bradbury (1995) have made an important contribution to understanding couples under stress by specifying the links between individual traits and the effect that stressful events may have on the marriage.

Two issues are not well addressed in this model. First, Karney and Bradbury, much like their predecessors in family crisis theory, attempted to explain marital quality as a single, unidimensional construct. As will be shown later, research findings suggest that marriages may change in different ways along various dimensions of the relationship. Second, Karney and Bradbury posited that enduring vulnerabilities affect adaptive processes, but they have neither specified those vulnerabilities nor the mechanisms of their effect.

Understanding these mechanisms are of utmost importance for family scholars, because they may allow us to better understand how changes in the marital relationship occur as the couple deals with stressful situations. In the next section, I will review research on the effect of stress on the marital relationship, with a specific focus on different sources of stress and various outcomes for marital relationships.

**Research on Marriages under Stress**

A review of the literature associating stress and marital relations reveals four main research avenues:

1. **Marital disruption as a stressor**, affecting family functioning and/or individuals’ well-being (e.g., children’s adjustment, children’s behavior, adults’ health, etc.);
2. **Marital relations as a resource**, conceptualized primarily as a mediating factor between stressful situations and family and/or individuals’ adjustment;
3. **Marital relationship as an outcome**, focusing on the effect of stressful situations on marital relationships (satisfaction, adjustment, quality, etc.); and
4. **Patterns and processes of interpersonal interactions** (i.e., support, coping) under stressful circumstances.

In this article, our primary concern is with the latter two types of research. I therefore begin with a review of research on the effect of stressful situations on the marriage, and then evaluate it in terms of family stress theory. I will then describe a recent (yet unpublished) study which raises some questions regarding dyadic processes under stress that do not seem to be adequately addressed by family stress theory.

**Effect of Stressful Situations on Marital Quality**

A review of the research reveals a growing interest among family researchers in the effect of stress on marital relations. Researchers have assessed the effect on the marital unit of a wide array of life situations: life events and daily hassles; normative transitions; economic distress due to underemployment and income loss; occupational stress in a variety of jobs and role conflict in dual-career marriages; acute and chronic physical illness of one or both spouses, as well as psychological problems; children’s congenital handicaps, developmental disabilities, chronic illnesses, and life-threatening illnesses; child’s death and pregnancy loss; and other sources of stress.

The majority of this research has employed quantitative analysis (correlational or group comparison) and has supported the assertion that stressful events have a deleterious effect on marital relationships. However, a few studies have also found a positive effect of the coping experience on the marital relationship, while others found no significant effect in either direction.

Studies have shown that dysfunctional couples report experiencing more frequent stressful life events as compared with non-clinical couples, in addition to an increase in the occurrence of such events shortly before the referral (Bird, Schuham, Benson, & Gans, before the referral). The negative association 1981; Frederickson, 1977) between stressful situations and marital quality was found with regard to a variety of sources of stress: (Klinnert, Gavin, stressful life events and transitions; Wamboldt, 1992; Williams, 1995b); (Conger, Ge, & income loss and economic distress; physical illness or Lorenz, 1994; Zvonkovic, 1988) (Binik, psychological symptoms of a spouse Chowanec, & Devins, 1990; Carter & Carter, 1994; Carter, Carter, & Siliunas, 1993; Hafstrom & Schram, fertility 1984; Lewis, Hammond, & Woods, 1993) (Andrews, Abbey, & Halman, 1991; problems; child’s Benazon, Wright, & Sabourin, 1992) developmental disorders, congenital handicap and (Fisman & Wolf, 1991; Fisman, Wolf, & disability Noh, 1989; Floyd & Zmich, 1991; Perry, Sarlo-
A few studies, however, found no effect of stress Blickman, Tanaka, and on the marriage. For example, Morokoff and Gilliland, as well as Chan (1991), found that marital strain or marital satisfaction (1993) were not tied to stressful life events. A number of researchers have also suggested that normative transitions bear only little significance in terms of, for example, Belsky (1986) effect on the marriage. Suggested that following the transition to parenthood, there are changes in the meaning of the relationship (namely, it is perceived less as a romance and more as a partnership), but overall marital quality does not found no Menaghan (1983b) change. Likewise, difference between couples undergoing normative life transitions and couples not in transition. Researchers also documented no deleterious effect on the marriage of non-normative events. No differences in marital quality were found between parents of children with a congenital handicap or developmental disorder and (Cappelli, McGrath, parents of healthy children Daniels, Manion, & Schilling, 1994; Van Riper, Mekosh). In another study, Ryff, & Pridham, 1992) found no significant Rosenbaum and Lasker (1995) difference in marital satisfaction between couples who suffered pregnancy loss and couples who had a successful pregnancy and birth, either immediately Najman et al after the loss/birth or at follow-up. Finally, compared couples who had lost their infant al. (1993) with a sample of parents whose infant had survived. They found a somewhat lower stability and quality of marriage among the bereaved group immediately after the death, but no difference between the two groups in marital quality at a 6-month follow-up.

Stress may also affect the relationship in a positive way. This has been found with regard to certain life-cycle transitions, particularly that of the empty nest and (Menaghan, 1983b; White & Edwards, 1990) (Hartman & Hartman, nonnormative transitions, as well as the result of coping with a serious 1986) Gritz, Wellisch, illness, such as a spouse’s cancer (Barbarin, or a child’s cancer Siau, & Wang, 1990). It appears that stressful Hughes, & Chesler, 1985) experiences may strengthen the relationship and result in increased cohesiveness and a more tightly bonded couple.

Research on both normative transitions, such as transition to parenthood, and non-normative events, such as chronic illness, childhood cancer, or child’s death, also suggests different patterns of change in Belsky & Rovine (1990) marital relationships, reported four main patterns of change in the marital relationship following transition to parenthood: accelerating decline, linear decline, no change, or a modest positive change. The pattern of change, they suggest, is dependent upon multiple factors, including demographic background, marital factors, and infant temperament. Similarly, couples who have struggled or (Dahlquist et al., 1993) with their child’s cancer (Lehman, Lang, Wortman, & who have lost a child may experience significant marital Sorenson, 1989) disruption or their relationship may be strengthened.

Relationships may also change in certain dimensions but not in others, or they may be negatively affected in some aspects and positively in, who Carter and Carter (1994) others. For example, studied couples in which both spouses were chronically ill and couples with only one spouse ill found that marital adjustment scores for levels of cohesion were significantly higher than reported norms, while levels of consensus were significantly lower. They suggest that the inverse relation of cohesion and consensus seems to indicate conflict-regulated oscillation and to describe a configuration of interaction which may be specific to married couples with physical illness.

Mediating factors

Two kinds of mediating factors between stress and marital outcomes have most commonly been examined: personal resources and marital factors. Personal resources that were found to moderate the outcome of the couple’s coping with stress include such attributes as sense of mastery over life events, being optimistic (Elliott, Trief, & Stein, 1986), belief in the ability to (Barbarin & Chesler, 1984) (Meeks, Arnkoff, Glass, & resolve disagreements, or stage of personality development Notarius, 1986). Additionally, improvement (Fuller & Swensen, 1992) in the marital experience of couples undergoing normative transitions was associated with adequate (Menaghan, 1983b) coping strategies.

Marital resources such as communication and supusal support have been suggested as an important factor influencing the effect of stress on the Gritz et al., (Elliott, Trief, & Stein, 1986). However, when these resources Gilbert, 1989) are modeled as affecting marital adjustment, a serious confounding of the findings may emerge. Furthermore, unless the interactional pattern of communication and of support giving and receiving is specified, the assertion that good relationship qualities (e.g., support, communication) are a predictor of marital adjustment adds very little to our understanding of marriages under stress.
Such interational processes have been described by a few researchers. For example, Yogev (1986), in a study of dual career couples, found that when one spouse changes his/her behavior in response to the other’s needs, it improves the overall marital situation. Research of parental coping with a child’s cancer (Barbarin et al., 1985; Dahlquist et al., 1993) suggest that a fit between the spouses’ perceptions and behaviors are associated with a higher marital satisfaction. Barbarin and his colleagues (1985) found that a match in some aspects of the spouses’ coping strategies was related to perception of marital quality and support from the spouse. Dahlquist et al (1993) found that marital distress was predicted by a combination of general emotional distress and a discrepancy between the partners’ anxiety levels: Greater differences in anxiety levels between the partners were associated with greater reported marital distress.

Patterns of Change in Marital Relationships Under Stress

While quantitative studies generally assess the direction of effect of stressful situations upon the marriage and the role of mediating factors, qualitative research suggests a more complex pattern of response. In a recent study, Lavee & Mey-dan (1997) analyzed quantitative and qualitative data from interviews with 35 couples whose children were diagnosed with cancer. Analyses of changes in marital relationships during the period of the child’s illness indicated that the ordeal had affected various dimensions of the relationship in different ways. More specifically, nearly all couples reported a significant deterioration in their sexual relationship, but at the same time they reported more satisfaction with their affective communication, better role relationships, and an increase in mutual trust. Little changes were reported in other relationship dimensions, such as conflict resolution, financial management, parenting, or relationship with the extended family.

Qualitative analyses of in-depth interviews with 21 of the couples indicated a more complex pattern of relationship changes across various stages of the illness. Of particular importance were changes in the relationship (affective communication, emotional support, and a general feeling of marital cohesion and emotional closeness) at times of heightened distress (i.e., immediately following the diagnosis, during relapses, or at times of physical deterioration), versus times of low stressfulness (i.e., prior to the diagnosis or during periods of improvement in the medical situation).

Four patterns of relationship changes in stressful vs. less-stressful times were observed: (1) Distant relationships characterized parents who had little communication and mutual support before the child’s illness, and who remained distant from each other in both “good” and difficult times. (2) Deteriorating relationships characterized parents who felt close to one another (in terms of support and communication) before the illness and whose relationship deteriorated afterwards. These couples also tended to draw closer to one another when the child’s health improved and to pull away from each other when relapse occurred or the child’s physical condition deteriorated. (3) Ameliorating relationships characterized couples in which the illness strengthened their communication and support of one another, and who felt closer to each other whenever the child’s medical condition deteriorated. (4) Fluctuating relationships characterized couples who went through periods of close and distant relationships throughout various periods of the child’s illness, regardless of the child’s condition.

The interviews suggested that individual’s behavior and reactions to each other’s behavior at times of heightened stress played an important part in the couples’ closeness-distance fluctuations across various stages of the illness. A variety of reactions were described: Anxious/pessimistic people continuously talked about their fears, were pessimistic, and sought continuous reassurance and support from the spouse; detaching persons were withdrawn under heightened stress, expressed no interest in interaction with the spouse or with others, and asked to be left alone; denying people tended to show no signs of being distressed, dismissed unfavorable information or warning signs, and continued with “life as usual”; protective persons refrained from discussing their fears or withheld information from their spouses in order to avoid making them distressed or anxious; irritated persons were irritated, angry, and impatient when distressed, and tended to blame and be aggressive toward the spouse; controlling people were described as task-oriented, efficient, determined, and in control of the situation; and balanced persons expressed fears and concerns, turned to their spouses for help and support, and expressed care for and wish to support their spouse.

Various combinations of husband-wife behaviors may have accounted for the different patterns of couples’ interaction. Some respondents described situations in which they became more cohesive, more intimate than ever before, while at other times they returned to “life as usual” – being involved with other life demands, other people, etc. Couples also
described situations in which it was just impossible to talk with each other because of the tense atmosphere, or times in which they didn’t care about each other. Some respondents said that although they had a “comfortable” marriage without usually being very close to each other; however, they pulled together when the child got ill. Finally, some couples reported that the whole ordeal had not changed their relationship in a significant way.

The findings of this study shed light on some marital experiences that are not well explained by family stress theory. More specifically, the quantitative component of the study indicated that relationships changed in different directions in various aspects of the marriage: some deteriorated, while others were strengthened or remained relatively unchanged. This differential change in various aspects of the relationship has also been found in a number of other studies. For example, studies that assessed the influence of stressful life events, or (Carter & Carter, 1994)spouse’s physical illness (Perry et al., children’s developmental disorders have indicated that dyadic consensus and 1992) affectional expression were most affected by the ordeal, whereas marital cohesion was strengthened or was unaffected. These findings suggest that conceptualizing and measuring marital “crisis” (or marital quality) as a unidimensional construct may obscure the differential effect that stress may have on different aspects of the marital relationship.

As for the different patterns of change in marital relationships suggested by our data, similar findings have also been reported in other studies that assessed parental coping with childhood cancer. Barbarin and his colleagues (1985) reported that over 50% of the parents had a more positive attitude toward their spouse, nearly 5% reported a more negative attitude, and the rest reported no change in attitude toward their spouse. In another qualitative study of parents whose children were diagnosed with cancer, reported that two out Macaskill and Monach (1990) of the six couples in their study reported greater closeness, and two other couples experienced a deterioration in the relationship and greater distance. found that Hughes and Lieberman (1990)Similarly, four out of ten couples reported deterioration in their marital relationship, while four other couples reported

Greenberg and Meadows (1991) a greater closeness, reported that 23% of the parents in their study learned how to support one another during the child’s illness, which resulted in a stronger relationship, while 25% of the parents reported marital problems and difficulty in attending to the partner’s emotional needs. Changes in marital relationships along stages of the coping process have also been documented by Burr and Klein (1994): In addition to increase, decrease, and no change in marital satisfaction associated with various stressful situations, marital satisfaction has been “roller-coasted” in more than 50% of the couples and has shown mixed pattern of change in an additional 17 percent. Furthermore, these patterns of change in marital relationship varied by the type of stressor.

The support that spouses provide to each other at times of stress seems to be of major significance. The support within the marriage may be mutual, where both spouses provide support to each other; it may be asymmetrical, with one spouse providing support to the other but not receiving support in return; or it may be that neither spouse provides (Lavee & Mey-Dan, 1997; support for the other . Although spouses may provide each Smart, 1992) other with different kinds of support (e.g., informational support, tangible support, emotional support, esteem), it appears that emotional, nurturing support exchanged between partners is most significantly associated with couples’ satisfaction with . Emotional (Cutrona & Suhr, 1992) their relationship support from the spouse has been associated with an increase in closeness, while lack of support has been (Brown, associated with relationship deterioration . Although people 1994; Hughes & Lieberman, 1990) may receive support from various sources, spouses have been reported as the most important source of (Barbarin et support at times of heightened distress al., 1985)

To summarize, although most studies indicate that experiencing stress has a deleterious effect on marital quality, studies also show a more complex pattern of relationship changes. First, we reviewed research suggesting that stress may have a differential effect on various aspects of the relationship. Thus, conceptualizing and measuring marital quality as a unidimensional outcome variable may obscure important differential influences of stress on the marital unit. Second, and perhaps more importantly, qualitative studies suggest an array of interactional patterns and changes in couples’ relationships that are not explained by family stress theory. These findings raise some new important questions: What determines couples’ interactions under stress? Under what circumstances do spouses get closer or more distant from each other? What accounts for ‘ups and downs’ in a relationship at various points in the stress process? What are the “enduring vulnerabilities” (Karney & Bradbury, 1995) and how do they influence the adaptive process and subsequent outcomes? How do spouses react to each other’s behavior under stress? Do different sources of stress and/or stress levels (Burr & Klein, 1994) elicit
different behaviors and different patterns of couple interaction?

While family stress theory may inform us of the factors that influence marital disruption or adaptation, it does not provide a means for understanding what transpires within marriages when faced with various types of stressors and how the couple’s enduring vulnerabilities shape the nature of their interpersonal interaction and its outcomes. These questions require an understanding that goes beyond the A, B, C, and X factors.

In the following and concluding section, I propose that processes described by systems theory and by attachment theory may help us to better understand interactional patterns in marriages under stress.

**Explaining Interaction in Marriages Under Stress**

The two theoretical perspectives discussed in this section — systems theory and attachment theory — may extend our understanding of dyadic processes under stress. These two theories vary greatly in scope and level of analysis, yet they appear to complement each other with respect to explaining what transpires in couples in stressful situations.

**Systems Perspective**

From the perspective of family systems theory, the question is not what variable(s) affect an outcome, but rather what are the processes (rules of transformation) that take place between the components of a system (i.e., members of the marital dyad) when an environmental stimulus (namely, awareness of an event) enters that system. The questions of systems-direct (Montgomery & Fewer, 1988) based analysis our interest to the effect that spouses have on each other, the fit of the spouses’ behaviors, and the effect of this fit on the functioning of the marital unit. (Such analysis is also concerned with the effect of the fit on each member’s functioning, as well as on the system as a whole, but this is beyond the scope of the present paper). According to systems theory, the components of a system affect each other through a feedback and control mechanism, so that the output from one subsystem (member A) is used as input into the other subsystem (member B) and vice-versa.

Unlike mechanical systems, human systems are self-reflexive, that is, they behave according to the meaning that the input has for them. In other words, faced with an environmental input (a stressor event), each member of the dyad acts according to the meaning that the event has for him or her. Based on one’s perceived meaning of the event and his or her internal rules of transformation, an individual will output a signal to the other member. This communication, note Whitchurch and Constantine (1993), involves more than simply an exchange of information in the sense of literal content. “Human communication... facilitates humans’ creation of meaning and their simultaneous activities of sending and receiving messages of Kantor and Lehr symbolic content” (pp. 329-330), maintain that the information processed by the (1975) system is distance-regulation information: Family members continuously inform other members what constitutes a proper or optimal distance in their relationships.

The information is processed through acts, sequences of acts, and strategies (recurrent patterns of interaction sequences) that are meaningful only in the context of interdependent relationships (Kantor & Lehr, 1975). Acts, the basic units of interaction processes, are manipulations of the environment that have “meaning” in terms of the context and of others. “[They] function simultaneously as a signal to others, a response to an antecedent signal, and a signal to the self. In other words, the social act is not an isolated event, but a relation taking place in a specific field of shared experience...” (Kantor & Lehr, 1975, p. 12).

Thus, let’s suppose that information is received indicating that a spouse has been laid off, the house has been severely damaged by a tornado storm, the child is seriously ill, or the newly born child has a congenital handicap. In response to this input, each member (1) acts upon the environmental input (the event), (2) reacts to the other spouse’s reaction to the input, and (3) reacts to the other spouse’s reaction to his/her own reaction to both the input and the spouse’s behavior... and so on and so forth. These sequences of acts, Kantor and Lehr (1975) suggest, should be understood within the distance-regulating strategies that characterize the relationship. Furthermore, because people, as “mindful components of living systems,” have memories of past experiences, interaction is continuous, that is, it fits with interactions that occurred previously and affects interactions that will come (Montgomery & Fewer, 1988). In other words, when an event occurs, the spouses’ actions are based on each person’s idiosyncratic meaning attached to the event (including his/her memories of interactions in other interpersonal systems) and memories of past experiences with the spouse. Kantor and Lehr (1975) also maintain that members of a system respond to each other’s verbal and nonverbal cues in a predictable way, “a fact that leads us to believe that members know the kinesic, motoric, or cognitive level the parts they are expected to play in family strategies” (18).
Kantor & Lehr (1975) focused their attention on the everyday strategies that evolve between two or more people in order to regulate and shape their relationships. However, whereas strategies of distance regulation may characterize a system in a steady state, both the needs for closeness/distance and the strategies used to regulate them may change as a result of environmental input and its meaning. For example, an anxiety-producing event may alter one’s need for closeness, which will influence his or her behavior so that distance is renegotiated. The spouse’s reaction may be influenced by the first member’s behavior, but also by his/her own need for distance, which may or may not change by the new stimulus. This distance renegotiation may have different outcomes in terms of the couple’s relationship.

Systems theory is a useful framework for understanding interpersonal processes in response to environmental stimuli. However, it informs us very little with regard to specific “rules of transformation,” both individual and interpersonal, that govern the processing of information when a stressful situation occurs. Attachment theory appears to fill this gap by addressing the question of how an anxiety-producing stimulus influences individuals’ actions and couples’ interactions.

Attachment Theory Perspective

Attachment theory is concerned with the ways in which individuals regulate emotions and behaviors in their relationships with significant others (attachment figures), especially when they feel distressed. Because the theory explains why and how individuals differ in their support-seeking and support-giving behavior under stressful situations, it is highly relevant for understanding couples’ interactions under stress and the various patterns of change in marital relationships in response to stressful events.

The study of adult attachment emerged from the work of Bowlby (1969, 1973, 1980) on the influence of maternal care during early childhood on personality development. A fundamental assumption of the theory is that individuals internalize their early experiences with caretakers by forming internal working models of their own self-worth and of their expectations for care and support from others. Thus, children whose attempts to achieve physical proximity and/or psychological security have been consistently met by caregivers develop internal models of attachment figures as dependable and psychologically available, whereas children whose bid for security have been ignored acquire models of attachment figures as rejecting; likewise, those who were responded to inconsistently develop mental models of others as inconsistent and untrustworthy.

Bowlby (1979) has conjectured that attachment behavior characterizes humans across the life span, from “the cradle to the grave.” The internal working models, as cognitive-emotional schemata of one’s interpersonal world, continue to regulate the individual’s tendency to seek and maintain proximity to and contact with specific individuals who provide the subjective potential for physical and/or psychological safety and security (Berman, Marcus, biological and social security (1994)).

Bartholomew, Adult relationship researchers (Feeney & Noller, 1991; 1990; Collins & Read, 1990; have Simpson, 1990) Nazan & Shayer, 1987; provided robust evidence in support of Bowlby’s claim that both the dynamics and the features of attachment relationships are essentially the same in infancy and adulthood, and that variations in early experiences produce relatively enduring differences in relationship styles. Nazan & Shayer (1987) have argued that adults in romantic relationships manifest behaviors very similar to the three attachment styles (secure, avoidant, and anxious/ambivalent) identified in childhood by Ainsworth and her colleagues.

Secure (Ainsworth, Blehar, Waters, & Wall, 1978) adults are described as being comfortable with intimacy and able to trust and depend on other people. Avoidant people are characterized by discomfort with closeness and by difficulty in depending on others, and anxious/ambivalent people, whose need for security and proximity have been responded to inconsistently during infancy and childhood, seek extreme levels of closeness and fear that they will not be loved sufficiently.

Bartholomew (1990) proposed a two-dimensional model of adult attachment comprised of four attachment styles, based on the intersection of positive and negative models of self and others. Two attachment styles are characterized by a positive model of others, but they differ in their model of self. Secure people, who have positive models of both the self and others, regard others as generally well-intentioned and perceive the self as the kind of person toward whom others are likely to respond in a helpful way. Preoccupied people (an attachment style that corresponds to the ambivalent style in Nazan & Shayer’s model) have a negative model of self and are characterized by a feeling of unworthiness and a constant desire to gain others’ affection.

The other two types in Bartholomew’s (1990) model have a negative model of others and are therefore characterized by avoiding close
relationships. Fearful avoidant individuals develop negative models of both the self and others. They desire social contact and intimacy, but experience a fear of rejection. In order to avoid the possibility of rejection, they avoid situations and relationships in which they perceive themselves as being vulnerable to rejection. Dismissing avoidant individuals, on the other hand, develop positive models of the self and therefore perceive social contact and intimacy as unnecessary. Although support-seeking is often highlighted in discussing attachment styles, and satisfaction with receiving support is most commonly studied, working models are thought to represent both sides of the attachment relationship: care-seeking and care-giving. This is (Kunce & Shaver, 1994) important for understanding adult relationships, because unlike attachment patterns in infancy and childhood, adult relationships are reciprocal in nature, with each member of the dyad expected to serve both (Hazan & & as a provider and a recipient of care. How are attachment models related Zeifman, 1994) to providing support? Securely attached people, who have a positive model of both the self and other, are more inclined to give support and reassurance to their partners when they are in need. In contrast, avoidantly attached persons score lower on measures of expressiveness, kindness, and awareness of others (Collins & Read, 1990) and are less likely to offer their partners reassurance and support in anxietyprovoking situations (Simpson, Rholes, & Nelligan, 1992). Attachment anxiety/ambivalent (or preoccupied) (Kunce & Shaver, 1994) attachment has been less consistently correlated with caregiving behavior. Such individuals are highly motivated to give support, but at the same time may be preoccupied with their own needs when distressed. There is ample evidence of association between adults’ attachment patterns and the quality of their Fuller & Fincham, (Berman et al., 1994; relationships, indicating that people’s Mayseless, 1995), 1995; satisfaction with relationships is related both to their own and to their spouse’s attachment styles. It is important to note, however, that the attachment system may not be fully activated until one or both spouses are confronted with a stressful situation. As Bowlby (1969, 1988) suggests, the attachment system is most strongly activated during times of pronounced stress, when individuals are threatened or distressed and feel a need for comfort and support. Such events heighten the accessibility of one’s mental models and elicit security-seeking and support-giving attachment (Simpson & Rholes, 1994). The different patterns of emotional reactions, support-seeking and support-giving behaviors among couples under stressful conditions have only recently been examined. Two studies of marriages under stress (Cafferty, Davis, Medway, O’Hearn, & Chappell, have shown that 1994; Fuller & Fincham, 1995) individuals with different attachment styles experience different degrees of anxiety, as well as different levels of general positive and negative affect. More specifically, secure husbands exhibit a more positive affect, a higher level of wellness, and more positive reactions than avoidant men, and secure wives report a more positive affect, less anxiety, less conflicts, and greater relationship satisfaction than both avoidant and ambivalent wives. The only study of couples’ behavioral interactions under stress has been conducted by Simpson, Rholes, and Nelligan (1992). These researchers found that individuals with different attachment styles respond to feelings of anxiety with distinct patterns of approach and withdrawal behavior. In their laboratory study, women were manipulated into an anxiety-arousing situation, and their interactions with their male partners were observed. The results revealed that avoidant and secure attachment styles influenced the extent of support-seeking and support-giving behaviors, depending on the amount of fear/anxiety displayed by the female partner. Avoidant women were less likely to seek support from their dating partner if they were highly anxious than if they were less anxious. Secure women, on the other hand, were more likely to seek support if they experienced greater anxiety. Thus, for avoidant women, greater anxiety inhibited support-seeking, whereas it evoked support-seeking in secure women. The amount of support provided by the men was also influenced by their attachment style in conjunction with the amount of fear/anxiety exhibited by their female partner. Avoidant men were less supportive if their partner’s anxiety was high than if it was low. For more secure men, the reverse pattern was found: Greater partner anxiety was associated with notably more support-giving. Hence, greater partner distress elicited more support-giving in secure men, whereas it suppressed support-giving behavior in avoidant men. So far, the research is not conclusive with regard to support-giving and support-seeking behavior of anxious/ambivalent (preoccupied) individuals and the findings are more consistent with Bartholomew’s (1990) “model of others” dimension. More specifically, the research indicates that: (1) distress elicits different patterns of affect, support-seeking, and support-giving from persons who possess secure and avoidant styles, and (2) the behavior of avoidant and secure persons is context-dependent, that is, the
emotional and behavioral features associated with attachment styles are most clearly apparent when they (or their partners) experience greater distress. Furthermore, it appears that secure persons tend to calibrate the amount of support to their partner’s needs, whereas avoidant persons provide support inversely related to the level of their partners distress. (Simpson & Rholes, 1994)

While no research has yet examined the support-seeking and support-giving behaviors of marital partners with various attachment styles under conditions of real-life stress, these findings may shed light on couples’ interactions in stressful situations and the various patterns of relationship change found in our (Lavee & Mey-Dan, 1997) study and other studies reviewed earlier. When securely-attached and avoidant spouses are considered simultaneously, three combinations of husband’s and wife’s attachment styles are possible: Secure–Secure, Secure–Avoidant, and Avoidant–Avoidant. Under conditions of higher and lower distress, the following patterns of relationships may be expected:

Secure–Secure: Under heightened distress, each member seeks support and proximity and is sensitive to the support and proximity needs of his/her spouse. There is mutual support and consultation, resulting in increased intimacy and marital cohesion. When the stress level decreases, the need for support and proximity decreases as well, so that some withdrawal may be evident. Couples with this type of attachment fit may therefore get closer and more cohesive when the stress level is high, and distance themselves into their habitual comfort zone at other times. In the long run, experiences of stress may strengthen the relationship.

Secure–Avoidant: Under heightened distress, one spouse (S) will seek greater proximity and support, but the other spouse (A) is likely to withdraw, showing a lowered need for support and less caregiving. The pattern of support within the marriage is likely to be asymmetric: S may offer support to A, but will seek support from networks outside the marriage. As the stress level decreases, the couple may get closer to one another. A is less likely to withdraw, will be more comfortable with proximity, and more likely to both seek support from and provide support to S. Couples of this attachment fit may therefore become more distant under heightened stress and get closer when stress dissipates. If stress continues at a high level, the relationship is likely to deteriorate.

Avoidant–Avoidant: Under heightened stress, both spouses withdraw. Little support is sought or provided within the marriage. Partners may seek some support (primarily informational and tangible support) from sources outside the marriage. Under lowered stress, spouses may get somewhat closer to each other, but there may be relatively little interdependence and greater separateness within the marriage. Thus, this type of attachment fit may be characterized by little change in closeness-distance at various stages of the stress process, and the relationship may be little affected by stressful experiences.

The combination (or fit) of spouses’ attachment styles and the way in which they interact with each other may extend our understanding of why and how couples:

- get closer under heightened stress and more distant when stress dissipates
- get more distant under heightened stress and closer thereafter
- get closer over time in response to stress
- get further apart and break up the relationship in response to ongoing stress
- experience no change in the relationship

Some Unsettled Issues and Directions for Future Research

We are only beginning to understand how stress affects marital relationships. Many issues are yet unsettled and require further research.

Within the perspective of attachment theory, most research has been conducted on college students and dating couples. Although a few recent studies examined attachment relationships of married couples and affectional responses to stress, we know very little about how attachment styles influence interactions under stressful situations among couples with varying lengths of marriage.

Furthermore, the research of couples under stress has been conducted on laboratory research. Research is needed on couples’ interaction under naturalistic stressful events.

Conceivably, the pattern of dyadic interaction (support-giving and support-receiving) would differ markedly under symmetrical stress (that is, an event or condition which affects both spouses in the same way) and asymmetrical stress (where an event or condition has a differential effect on both spouses). Examples of symmetrical stress are a child’s illness, child’s death, natural disaster, or war. Examples of asymmetrical stress are spouse’s illness, job distress, or death of a spouse’s parent. Additionally, there are events that might have a similar or different effect on spouses, such as fertility problems or temporary separation.
and reunion. More research is needed to examine patterns of interaction under these different conditions.

More research is needed on couples’ interaction through different courses of stressful events (Rolland, 1994), whether they may be acute or gradual, progressive, constant, or relapsing; non-fatal, life-threatening, or fatal. Rolland discussed these varying types with regard to illness, but they may just as well be characteristics of other stressful conditions.

Although some studies suggest that emotional support which spouses give to and receive from each other is most significantly associated with how people evaluate their marriage under stress, other studies have shown that the outcome of the marital unit’s coping with stress is influenced by other factors, such as coping styles and shared perceptions. Research is needed to examine whether and how attachment styles, and particularly the fit of spouses’ attachment styles, account for coping effectiveness and shared perception.

Research has consistently shown that chronic stress is associated with a decrease in marital quality. Research is needed to identify those couples whose marriage has not deteriorated under chronic stress and to examine their traits and adaptive processes.

There is an indication that culture influences how people perceive and interpret stressful situations. Clearly, more research is Florian, 1992 (cf., needed on whether and how culture influences the patterns of interaction in couples under stress.

Finally, we reviewed some patterns of interaction that surfaced through qualitative research. More qualitative studies of couples under stress would most likely reveal other patterns of interaction, response patterns, and outcomes. This is neccessary for a more thorough understanding of the factors and processes that influence marriages under stress.

REFERENCES


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