Examining the Relationship Between Parenting Problems and Intimacy

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Abstract

Conflict among couples can improve or diminish relationship intimacy (Prager et al 2015). Although parenting is a common source of conflict among couples (Owen & Rhoades, 2012), child-related conflict has yet to be examined in the context of specific relationship qualities such as intimacy although it has been linked with general relationship satisfaction (Linville et al 2009). Theoretically, couples who disagree more about parenting may feel less safe and connected with their partner due to potential frequency of parenting related discussions. The present study sought to examine intra-individual and cross-partner associations of Parenting Problems [PP] and relationship intimacy. We hypothesized that an Actor's total PP, and the three subscales, would negatively predict their own, and a partner's intimacy.

Data were collected from both partners of 43 married (73%) or cohabitating heterosexual couples via local integrative health centers, flyers, and word of mouth. Parenting Problems [PP] and Intimacy were measured using the Parenting Problems Checklist and the Intimate Safety Questionnaire. Data were analyzed using Actor-Partner Interdependence Modeling within multilevel modeling. Results indicated that an Actor's Total PP negatively predicted their own, but not their partner's, intimacy. Regarding the PP subscales, open conflict negatively predicted one's own, but not a partner's, intimacy. Further, an Actor's report of the dyad's tendency to undermine each other's relationship with children negatively predicted a partner's, but not one's own intimacy. Finally, the subscale parental disagreement was not predictive of one's own, or a partner's, intimacy. Implications and future research will be discussed.

Introduction

Parenting is a common source of conflict among couples (Owen & Rhoades, 2012). For example, couples tend to experience declines in relationship satisfaction upon the transition to parenthood (Belsky & Kelly 1994; Belsky & Pensky, 1988; Lineville et al., 2009; Owen & Rhoades, 2012), which has been hypothesized to partly be due to the increased potential for conflict regarding parenting (Lineville et al., 2009; Schulz, Cowan, & Cowan, 2006; Shapiro, Gottman, & Carrere, 2000). This increase in interparental conflict, when notably combined with the decrease in positive interactions between parents, can result in a drop in relationship satisfaction (Belsky & Kelly, 1994; Belsky & Pensky, 1988; Lineville et al., 2009;). Additionally, research suggests that this decline in relationship quality, particularly the female partner's satisfaction after the first child, can increase the likelihood of divorce (Lineville et al., 2009; Cowan & Cowan, 1992; Shapiro et al., 2000). Along these lines, the primary sources of stress for divorced parents involves increased levels of interparental conflict and lack of cooperation in parenting practices (Fincham, 2003; Grych, 2005; Lebow & Rekart, 2007; Owen & Rhoades, 2012; Pruett, Williams, Insabella, & Little, 2003). In sum, becoming parents can create additional stress for even the healthiest of couples, since the addition of a new, dependent, family member leaves less time for the couple to connect emotionally and physically due to things such as exhaustion, lack of time alone, and/or emotions related to uncomfortable acclimation to change, and parenting issues can cause additional stress on already distressed marriages.

Research also demonstrates that conflict among couples can enhance or hinder relationship intimacy (Prager et al., 2015) and relationship health in general (Gordon & Chen, 2016) depending on how the conflict is handled. For example, conflict is negatively associated with relationship satisfaction when a partner perceives that their emotions and point of view were not valued or

understood by their counterpart (Gordon & Chen, 2016). Due to the reduction of time, energy, and increased stress involved in the transition and duration of parenthood (Cowan & Cowan, 1992; Lineville et al., 2009; Shapiro et al., 2000), it is highly likely that recognizing a partner's point of view (or even the perception of such recognition) can decrease and become less of a couple's priority during this time (Gordon & Chen, 2016). Thus, the importance of intimacy, the behavioral phenomenon in which a vulnerable disclosure is met with a positive, or validating, response by the receiver (Cordova & Scott, 2001), within the parents' relationship could decrease in the face of heightened potential interparental conflict and lack of time to connect and feel as if on a team together (Owen & Rhoades, 2012).

Furthermore, it is possible that specific types of child-related parental conflict, such as a partner undermining the other parent in front of the children, could lead to the undermined partner to feel betrayed, separate, and/or attacked by their counterpart. This feeling of betrayal, if not handled well within the relationship, could evolve into the wounded partner choosing to be more emotionally distant and less likely to disclose feelings to their partner for fear of continued negative responses (i.e. rejection or undermining; Cordova et al., 2001). Additionally, open conflict or simple parental disagreement might contribute to emotions related to not feeling understood, supported, or valued by one's partner (Gordon & Chen, 2016) as well as starting to feel more like two individual units as opposed to a team working together as parents, which could further erode intimacy between the partners.

Taken together, relationship satisfaction has been consistently associated with both intimacy and parental conflict separately (Linville et al., 2009), but the association between child-related conflict and relationship intimacy has yet to be examined. Therefore, using data from a larger study of an intervention to increase relationship satisfaction, the present study sought to examine intra-

individual and cross-partner associations between parenting problems and relationship intimacy. Specifically, we hypothesized that an actor's (the term given to the person within each dyad randomly assigned as the potential "predictor" within the APIM model) perceived Parenting Problems would negatively predict both their own and their partner's intimacy. Additionally, we sought to examine what types of parenting problems (i.e. Parental Disagreement about rules and regulations, Open conflict over child rearing, Extent to which parents Undermine each other's relationships with the children) predict one's own and a partner's intimacy. In utilizing these subsections within the PPC, we hoped to gain insight which could contribute to knowledge and future clinical practice aimed at improving relationships within couples with children. For instance, if an actor's parental disagreement was not predictive of a partner or actor's intimacy, theories surrounding the extent of parental disagreement in the realm of intimacy, or other aspects of a relationship, can be used to inform interventions. Therefore, we also hypothesized that each of these parenting problem sub-types would negatively predict both one's own and a partner's intimacy, to tap into the multitude of ways a relationship between intimacy and PP could present within couples.

Method

Participants

Data were collected from 150 couples (93 married; 57 cohabitating) who were a subset of a larger community effectiveness study. Couples for the larger study were recruited from the community via flyers, community events, and word of mouth. The program was targeted as a brief intervention aimed at improving relationship health. To be eligible to participate in the larger study, participants needed to be cohabitating, in an emotionally and physically safe relationship, and over the age of 18. Further participant demographic information can be found in Table 1. Participants in

this study were the subset of couples who received the intimacy and parenting questionnaires in addition to the larger study's standard packet of measures.

Procedures

Upon enrolling in the study, each member of the dyad was mailed a questionnaire that they were to complete separate from one another before the first session and were asked to provide informed consent to the study. After participating in the brief two-session intervention, couples were followed up at 1-month and 6-monthss post-intervention. Only relationship satisfaction was assessed at 6-months post-intervention, thus, for the present study we will only examine change through 1-month post-intervention.

Measures

Intimacy was assessed using the Intimate Safety Questionnaire-Short Form (ISQ-SF; Cordova et al., in press). The questionnaire is composed of 10 items that assess how safe and connected one feels with his or her partner and in their relationship using a five-point Likert scale (0 = Never; 4 = Always) with higher scores indicating greater intimacy. An example item from this measure is "*When I need to cry I go to my partner*." This form demonstrated excellent reliability in the present sample (baseline: a = .89; 1-month post-intervention: a =.94).

Parenting problems were assessed using the Parenting Problems Checklist (PPC; Morawska & Thompson, 2009). This 16-item questionnaire utilizes both dichotomous (yes/no) and Likert scale (1- not at all to 7-very much) items to assess the extent to which parenting-related conflict is experienced within the relationship. An individual is asked to respond yes/no and then rate the commonality of statements such as: "Fighting in front of children," "Children preventing parents from being alone," and "Inconsistency between parents" (Morawska & Thompson, 2009). The PPC is composed of three sub-scales: 1) parental disagreement about rules and discipline (hereafter

referred to as "parental disagreement"), 2) open conflict over child rearing (hereafter referred to as "open conflict"), 3) extent to which parents undermine each other's relationships with their children (hereafter referred to as "undermining"). This form also demonstrated excellent reliability in the present sample (baseline: a = .825; 1-month post-intervention: a =.809).

Analytic Strategy

The data were analyzed using an Actor Partner Independence Model (APIM; Kenny et al., 2006) in a multilevel modeling framework to control for the interdependence of the data. The data were analyzed using mPlus 7.0 (Muthen & Muthen, 1998-2013). Missing data were handled using full information maximum likelihood (FIML).

Results

First, we examined whether an actor's parenting problems (PP) predicted their own and their partner's intimacy. Results revealed that an actor's total PP negatively predicted their own intimacy but not their partner's intimacy.

Next, we examined how the subscales of the Parenting Problems Checklist (i.e. parental disagreement, open conflict, and undermining) predicted one's own or a partner's intimacy. Results indicated that parental disagreement was neither predictive of one's own, nor a partner's, intimacy. Open conflict negatively predicted one's own, but not a partner's, intimacy. Finally, an actor's report of the dyad's tendency to undermine each other's relationship with children negatively predicted a partner's intimacy, but was not predictive of their own intimacy.

Discussion

Collectively, these results suggest that parenting problems are associated with less intimacy. Specifically, actors' Open Conflict predicted their own report of intimacy and their reports of Undermining negatively predicted their partners' intimacy. Contrary to our hypotheses, an actor's

total PP did not predict his or her partner's intimacy. Interestingly, however, an actor's intimacy did negatively predict their own total PP. Thus it seems that actor's perception of PP could be predictive of their feelings related to teamwork and further intimacy within the relationship as a whole. It also appears that there is something, particularly with undermining behaviors, that seems to contribute to reductions in one's partner's intimacy. However, it is important to note that an actor's Parental Disagreement did not predict an actor's or a partner's intimacy. In sum, although these data are correlational in nature, and causality cannot be inferred, it appears that issues regarding parenting could have implications on intimacy (and vice versa).

We were surprised that an actor's total PP did not predict a partner's intimacy, since we were aware of predictive relationships between intimacy and conflict (Owen & Rhoades, 2012) as well as conflict and parenthood (Lineville et al., 2009; Schulz, Cowan, & Cowan, 2006; Shapiro, Gottman, & Carrere, 2000). However, a negative relationship was seen within an actor's report of PP and their own report of intimacy. This suggests that one's perception of parenting problems may have implication of their own intimacy, or feelings of safety and connectedness in the relationship. This feeling of teamwork might be especially conducive for the development and maintenance of intimacy within relationships, since it could inspire collaboration and discussion of feelings related to differences in parenting and other ideas within the relationship. Again, the idea of teamwork brings to mind the concept of support, which can be demonstrated to one's partner in ways (emotional, physical) that are associated with intimacy. Therefore couple interventions seeking to improve relationship intimacy may want to attend to parenting issues that may be present in the relationship.

Additionally, these results could be the indication of a positive or negative sentiment override within the actor's perception of the relationship that can be seen throughout the measures

and not just parenting and intimacy (Weiss 1980). This would mean that an actor's overall negative or positive feelings about the entire relationship as a whole would color their responses on examining all aspects of the relationship. In having a negative view of a relationship, one might feel more inclined to respond in a way that reflects those negative feelings within certain parts of the relationship, such as parenting and intimacy. However, this is again one of the limitations of having a free response measure, as it reliant on the perception of the individual who is filling out the questionnaire.

Subscale Breakdown

That parental disagreement was not predictive of an actor or a partner's intimacy levels is encouraging as it suggests that parental disagreement is not inherently "bad" nor indicate a lack of intimacy and feeling as if on a team together. Further, this supports the notion that how conflict is handled and/or addressed within the relationship is more important than the actual conflict itself (Prager et al., 2015).

Regarding open conflict, which denotes a potentially less productive and conductive means to the parental disagreement mentioned above, its negative prediction of an actor's own intimacy seemed to further support the results from the total PPC and intimacy. However, it is possible that the "open" nature of open conflict was the reason it had influence on the actor's perception of intimacy. In other words, it's possible that there was an exact instance that can be pinpointed within the actor's mind of having an open disagreement with their partner, thus being more visceral and easily recalled when thinking about teamwork with one's partner (and therefore intimacy as well). However, it is important to acknowledge that a level of intimacy may be needed to be able to have an open conflict.

Regarding undermining, it appears that an actor's perception of undermining behaviors within the dyad is related to partner's intimacy, but interestingly not one's own intimacy. These results might be highlighting that undermining could be a passive-aggressive way to address tensions within the parental relationship which could be precipitated by low levels of intimacy as well as result in low levels of intimacy. By going through the children to express discontent and/or disagreement, as opposed to confronting one's partner, it could potentially mean that the partner does not feel safe or secure enough to share one's feelings directly with the actor, which is a reflection of intimacy. Thus, an actor might be reporting on their partner's undermining behavior within the relationship when asked about undermining within the relationship overall. This could mean that at some level, if not reporting on one's own undermining behaviors, that the actor's report of the partner's undermining levels corresponded to the partner feeling low levels of intimacy.

It is important to address the limitations within this study. As mentioned before, the directionality of causation cannot be inferred due to the cross-sectional nature of the study. A longitudinal study would be needed and encouraged as a future direction in order to fully understand the nature of this relationship between parenting and intimacy. The measures utilized were self-report, which can be a limit in that one's perception can be distorted from the reality of the relationship. Additionally, since the PPC is a couple level measures, the nuance of each partner's contribution to PP is missed.

In thinking of ways in which this research and study could be expanded and the clinical applications it could have, it is important to again address the need for a longitudinal study to fully conceptualize the directionality of the relationship. In implementing interventions aimed at increasing relationship intimacy, it may be useful to screen for issues regarding parenting when

working with parents. It could also be useful to examine the implications that poor parenting problems and intimacy have on the children and how improvements in these domains affect children as well. Research has documented the ways in which interparental relationships and conflict can affect the development and relational stability of the children. Specifically, child related conflict (as is measured within the PPC) has been shown to have more negative effects on children than simple couple disagreement that does pertain to the child (Lineville et al., 2010) This means that by increasing intimacy by way of decreasing parenting problems (or vice versa), it could further the possibility of positive child outcomes.

Table 1 Present sample's demographic characteristics

Demographic	%	N
Age		
18-24	12.50%	19
25-34	42.1%	64
35-44	25.0%	38
45-54	12.5%	19
55-64	3.9%	6
Over 64	3.90%	6
Marital Status		
Yes	61.80%	94
No	38.20%	58
Gender		
Male	50.00%	76
Female	50.00%	76
Race		
White	75.70%	115
Black or African American	19.7%	30
Asian	0.7%	1
Native Hawaiian or Other Pacific Islander	0.0%	0
American Indian/Alaska Native	4.6%	7
Other	0.0%	0
Education		
No degree or diploma	9.9%	15
High-School diploma/GED	45.4%	69
Voc/Tech Certificate	11.2%	17
Associate's degree	11.2%	17
Bachelor dgree	16.4%	25
Master's Degree/PhD	6.6%	10
Employment Status		
Full Time	37.8%	56
Part Time	11.5%	17
Retired	5.4%	8
Student	7.4%	11
Disabled	12.2%	18
Unemployed	25.7%	38
Personal Gross Income (not as a couple)		

None	22.8%	34
Less than $10,000	18.1%	27
$10,000-$19,000	21.5%	32
$20,000-$29,000	12.1%	18
$30,000-$39,000	8.7%	13
$40,000-$49,000	5.4%	8
$50,000-$59,000	6.0%	9
$60,000-$69,000	0.7%	1
$70,000-$79,000	2.7%	4
More than $80,000	2.0%	3
Total number of children living in the home		
0	38.2%	58
1	13.2%	20
2	19.1%	29
3	11.8%	18
4	7.2%	11
5	2.0%	3
6	1.3%	2
9	0.7%	1
Parenting Status		
Parents	55.4%	82
Non-Parents	44.6%	66

Table 2 Descriptive statistics of sample

	Mean	SD	Range
Intimacy Safety Questionnaire Total	38.32	6.66	12 – 48
Parenting Problems Checklist Total	37.62	20.97	16 – 95
Parental Disagreement	14.12	8.57	6 – 37
Open Conflict	13.74	6.48	6 – 34
Undermining	9.45	6.62	4 – 28

Table 3

Fixed effects for an individual's total parenting problems responses predicting both one's partner and own intimacy levels

	Actor's Intimacy				Partner's Intimacy			
Predictor	B	*SE*	*ß*	*p*	*B*	*SE*	*ß*	*p*
Actor Total Parenting Problems	-.10*	.05	-2.03	.042	-.04	.03	-1.15	.25
Actor Parental Disagreement	-.19	.10	-1.85	.07	-.08	.09	-.87	.38
Actor Open Conflict	-.42*	.16	-2.59	.01	.02	.14	.15	.88
Actor Undermining	-.22	.15	-1.45	.15	-.21*	.09	-2.45	.01

Note. *$p < .05$, **$p < .01$, ***$p < .001$

Table 4: APIM Model

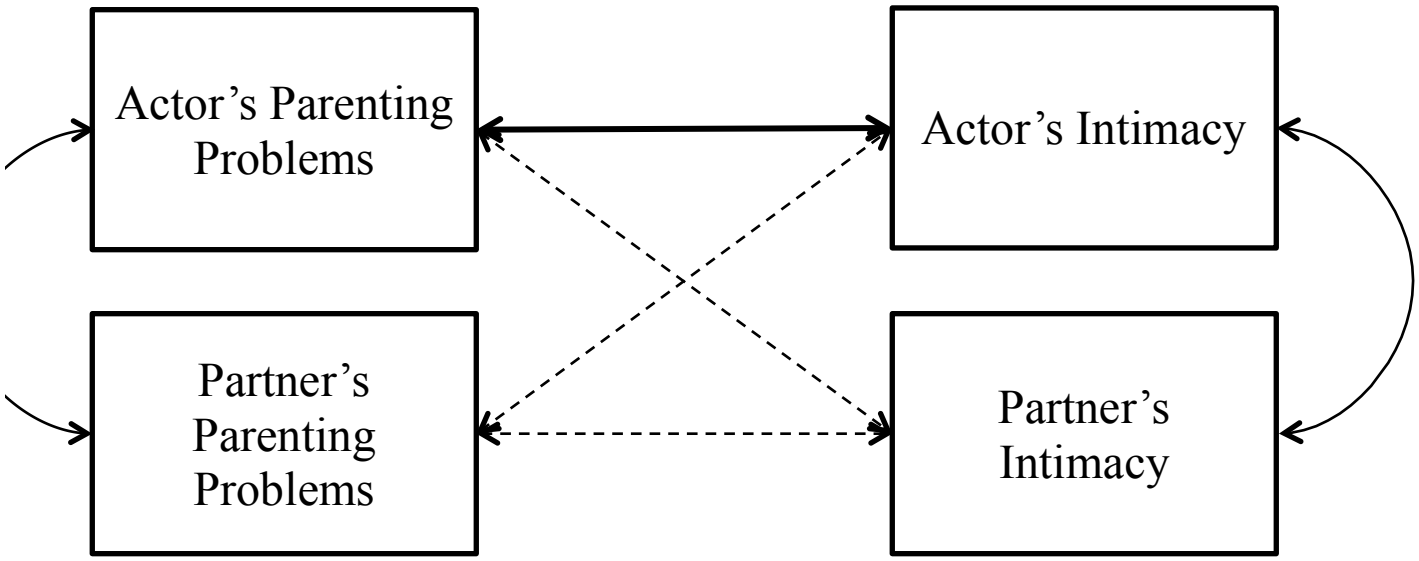
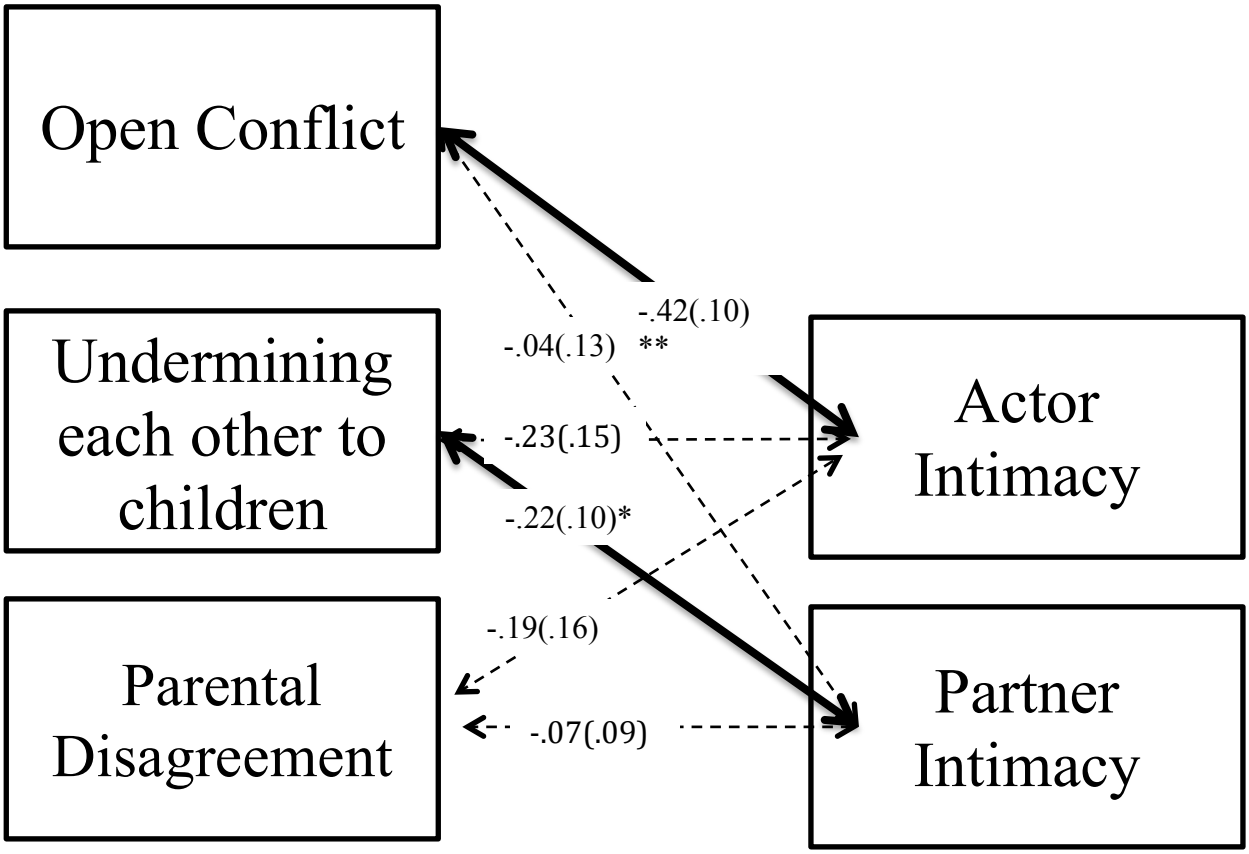


Table 5: Subscales Outlined Model



References

Belsky, J., & Kelly, J. (1994). The transition to parenthood: How a first child changes a marriage. Why some couples grow closer and others apart. New York: Dell.

Belsky, J., & Pensky, E. (1988). Marital change across the transition to parenthood. Marriage and Family Review, 12, 133–156.

Cordova, J., Fleming, C., Morrill, M., Hawrilenko, M., Sollenberger, J., Harp, A., . . . Nezu, Arthur M. (2014). The Marriage Checkup: A Randomized Controlled Trial of Annual Relationship Health Checkups. Journal of Consulting and Clinical Psychology, 82(4), 592-604.

Cordova, J., & Scott, R. (2001). Intimacy: A behavioral interpretation. The Behavior Analyst, 24(1), 75-86.

Cowan, C., & Cowan, P. (1992). Is there love after baby? Psychology Today, 25(4), 58–66.Fincham, F. D. (2003). Marital conflict: Correlates, structure and context. Current Directions in Psychological Science, 12, 23–27.

Gordon, A., Chen, S., & Kawakami, Kerry. (2016). Do You Get Where I'm Coming From?: Perceived Understanding Buffers Against the Negative Impact of Conflict on Relationship Satisfaction. Journal of Personality and Social Psychology, 110(2), 239-260.

Grych, J. H. (2005). Interparental conflict as a risk factor for child maladjustment: Implications for the development of prevention programs. Family Court Review, 43, 97–108.

Lebow, J., & Rekart, K. N. (2007). Integrative family therapy for high-conflict divorce with disputes over child custody and visitation. Family Process, 46, 79–91.

Linville, D., Chronister, K., Dishion, T., Todahl, J., Miller, J., Shaw, D., . . . Wilson, M. (2010). A Longitudinal Analysis of Parenting Practices, Couple Satisfaction, and Child Behavior Problems. Journal of Marital and Family Therapy, 36(2), 244-255.

Morawska, A., & Thompson, E. (2009). Parent Problem Checklist: Measure of parent conflict. Australasian Psychiatry, 2009, Vol.43(3), P.260-269, 43(3), 260-269.

Owen, Jesse, & Rhoades, Galena K. (2012). Reducing Interparental Conflict among Parents in Contentious Child Custody Disputes: An Initial Investigation of the Working Together Program. Journal of Marital and Family Therapy, 38(3), 542-555.

Prager, K. (1991). Intimacy Status and Couple Conflict Resolution. Journal of Social and Personal Relationships, 8(4), 505-526.

Prager, K., Shirvani, F., Poucher, J., Cavallin, G., Truong, M., & Garcia, J. (2015). Recovery from conflict and revival of intimacy in cohabiting couples. 22(2), 308.

Pruett, M. K., Willimans, T. Y., Insabella, G., & Little, T. D. (2003). Family and legal indicators of child adjustment to divorce among families with young children. Journal of Family Psychology, 17, 169–180.

Schulz, M., Cowan, C., & Cowan, P. (2006). Promoting healthy beginnings: A randomized controlled trial of a preventive intervention to preserve marital quality during the transition to parenthood. Journal of Counseling and Clinical Psychology, 74(1), 20–31.

Shapiro, A., Gottman, H., & Carrere, S. (2000). The baby and the marriage: Identifying factors that buffer against decline in marital satisfaction after the first baby arrives. Journal of Family Psychology, 14, 59–70.

Weiss RL. 1980. Strategic behavioral and marital therapy: toward a model for assessment and intervention. In Advances in Family Intervention, Assessment and Theory, ed. JP

Vincent, 1:22971. Greenwich, CT: JAI Press