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Marital Problems Occurring in Midlife: Implications for Couples Therapists

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The ability of therapists to adequately address the presenting problems of couples impacts the process and outcome of therapy. Although research has examined the types of problems that couples commonly experience, little is known about problems among midlife couples. Midlife marital problems were examined using data from a national random sample of 632 married people between the ages of 40 and 50. The results indicated that the most common problems were financial matters, ways of dealing with children, and sexual issues. Values, commitment, spiritual matters, and violence were the least common problem areas. There were few differences when gender, remarriage, and length of marriage were considered.

People come to couples therapy with a variety of relationship problems. These problems vary in their impact on the relationship (Whisman, Dixon, & Johnson, 1997). While some problems may be annoying and bothersome, others, such as extramarital affairs, are significant predictors of subsequent divorce (Amato & Rogers, 1997). Problems also differ in the level of difficulty that therapists have in helping couples alleviate the problems (Whisman, Dixon, & Johnson, 1997), with some problems being relatively easy to resolve, while others, such as alcoholism, being chronic and difficult to treat.

What a therapist does with a couple's presenting problem can have major implications in the outcome of therapy. Helmeke and Sprenkle (2000) identified pivotal moments in therapy through a series of in-depth interviews with couples as they went through the therapy process. They found that

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pivotal moments typically occurred after repeated discussion of the couple's presenting problem. They also found that early pivotal moments in therapy revolved around the therapist assessing client's perception of their current problems. Moreover, in a review of outcome studies, Orlinsky, Grave, and Parks (1994) identified a therapist's ability to focus on the client's problems as one variable that consistently has been shown to have a positive effect on the outcome of therapy.

Another way problems influence therapy is in the formation of the therapeutic relationship. For many years, this alliance has been considered the best predictor of therapy's outcome (Hill & O'Brien, 1999; Horvath & Luborsky, 1993; Krupnick, Stotsky, Simmons, Moyer, Watkins, Elkin, & Pilkonis, 1996). It has been estimated that 30% of improvement in psychotherapy is a function of the therapeutic relationship (Lambert & Barley, 2002). One effective way to establish this relationship is for the therapist to validate the client's presenting problem (Laszloffy, 2000).

It is likely that marital problems may vary according to the stage of the family life cycle because challenges and obstacles experienced by couples changes throughout life (Miller, Yorganson, Sandberg, & White, 2003). Since midlife is a period of life during which the family and individual are going through a number of transitions, such as menopause, caregiving, and death of parents, it seems that their problems may differ in type or severity compared to younger couples. Unfortunately, little research has examined marital problems in midlife.

The purpose of this study is to examine the frequency of problem areas faced in midlife marriages, the level of impact that they have on marital satisfaction, and the role gender plays in the perception of marital problems. This information will help therapists as they establish therapeutic relationships, as well as assess and treat midlife couples.

Marital Problems

Communication, sexual intimacy, money, and power have for many years been identified as problems commonly faced by couples. One longitudinal study by Storaasli and Markman (1990) examined 10 problem areas: money, communication, relatives, sex, religion, recreation, friends, drugs and alcohol, children (potential children), and jealousy. The community-based sample included 40 couples that were followed from pre-marriage through early parenthood. Each partner evaluated the extent that each problem had on their relationship using a scale from 0 to 100, The results indicated that the two most common problems were money and communication. Areas that were not reported as being common problems were religion, recreation, and alcohol/drugs.

In a more recent study using a clinical population, similar results were found (Miller et al., 2003). The sample consisted of couples who had been

married, on average, less than 10 years and no more than 20 years. They found that out of a possible fourteen problem areas, communication and financial matters were the most commonly reported problems. Other common problem areas were emotional intimacy, sexual issues, leisure activities, and dealing with children.

Therapists working with couples have observed similar problems among the couples that they treat. A therapist perspective was used in the study by Whisman, Dixon, and Johnson (1997), who surveyed 500 therapists working with couples and families to find out the most common marital problems that they encountered in their clinical practice. The results showed that, once again, communication was the most common problem, with power struggles being reported as the second most common.

Most of the research on marital problems has either been with samples that are in the early stages of marriage or with samples that have unspecified marital duration. Only one study has examined marital problems among midlife couples. Using a midlife sample from the northwestern region of the United States that included both distressed and nondistressed groups of couples, Levenson, Carstensen, and Gottman (1993) examined the frequency of 10 conflict areas. They found that the most common problems experienced by these couples were children, money, communication, recreation, and sex. The least common conflict areas were jealousy, alcohol and drugs, and religion.

Midlife Marriages

Despite the fact that the Babyboom generation is now in midlife, reflecting an unprecedented number of midlife couples in American society, little is known about the characteristics of marital relationships in midlife. However, midlife couples face a number of important and unique transitions that influence the problems a couple may be dealing with. An examination of these transitions might provide insight into the dynamics of midlife relationships. Midlife is a time when many couples face the responsibility of caring for their frail, elderly parents (Tornatore & Grant, 2002). Even though providing extensive assistance for aging parents is stressful (Lowenstein & Gilbar, 2000), several studies have found no significant changes in well-being, marital happiness, or marital interaction among adult daughters caring for ill or disabled parents (Franks & Stephens, 1996; Hoyert & Seltzer, 1992; Loomis & Booth, 1995; Suitor & Pillemer, 1994). In addition, some middle-aged couples find themselves simultaneously providing care for their children and their aging parents. This added responsibility generally does not have a negative impact on the couple's relationship (Ward & Spitze, 1998).

Midlife is also the time when couples make the substantial transition of launching their children and living alone as a couple. Linking this transition to the popular label of the "The Empty Nest Syndrome" suggests that this is

a time of increased marital problems. However, research suggests that most couples experience a modest increase in marital satisfaction after their last child leaves home (White & Edwards, 1990).

A parent's death also has the potential to undermine and strain a marital relationship (Guttman, 1991). Research suggests an increase in conflict and a decline in relationship harmony are common among couples where a spouse is grieving over the loss of a parent (Umberson, 1995; Scharlach & Fredriksen, 1993).

Menopause is another individual life-course transition that can potentially impact a marriage. Mood states such as anger, anxiety, and depression are often associated with the severity of menopausal symptomotology (Kurpius, Maresh, & Nicpon, 2001). In addition, Matthews (1992) found that because of biological changes associated with menopause, couples are often at increased risk for sexual problems.

Despite popular opinion and widespread media attention, "midlife crises" rarely have a negative impact on marital relationships. Research suggests that midlife crises are experienced by only a small minority of people (Wethington, 2000). Moreover, those few people that do experience it seem to be dealing more with reassessing personal or professional goals and priorities, rather than with marital relationships (Braverman & Paris, 1993; Hermans & Oles, 1999; Waskel, 1991).

Thus, midlife couples experience a number of transitions and experiences that are unique to their stage in the life course. However, it is unclear if these experiences create increased stresses that manifest themselves in increased marital problems in common areas, such as communication, children, and money. Consequently, it is important to examine common relationship problems among these couples.

The Effect of Problems on Marital Satisfaction

Previous research suggests that some marital problems have a greater impact on marital satisfaction than others. Storaasli and Markman (1990) found that, although there was a negative correlation between marital satisfaction and all of the 10 problem areas in their study, communication and sex had the greatest impact on marital satisfaction. In contrast, money, recreation, children, and religion had a less substantial impact on the quality of the relationship.

Another way to examine the effect of problems on a marriage is to look at the amount of conflict that is caused by the problem. Douglas and Douglas (1993) were able to identify the problems that caused the most relationship conflict among their sample of 67 couples. They used a list of 38 problem areas and asked couples to rate how much conflict these problems caused in their relationship. The results indicated that the husband or wife's mood/temper and disciplining of children caused the most conflict in these

marriages. Interestingly, communication was reported as one of the least frequent causes of relationship conflict.

Marital problems not only affect the level of marital satisfaction, but can be a good predictor of divorce, as well. Amato and Rogers's (1997) large longitudinal national probability study looked at relationship problems that predict divorce. They found that reports of sexual infidelity, jealousy, drinking, spending money, not communicating, and anger were significant predictors of divorce 12 years later, with sexual infidelity being the strongest predictor. Being domineering, being critical, being moody, having irritating habits, not being home enough, and having easily hurt feelings were not significant predictors of subsequent divorce.

Gender Differences

Gender is an important contextual variable that may influence perceptions of marital problems. Previous research has generally found that women report more problems in their relationships than men (Amato & Rogers, 1997). For example, Miller et al. (2003) found that women reported six out of the possible fourteen problem areas at significantly higher levels than men. These six problem areas were dealing with children, emotional intimacy, sexual issues, parent/in-laws, communication, and decision-making. Also, Storaasli and Markman (1990) reported that men rated communication, sex, and recreation significantly higher than women, while women rated communication, sex, and recreation as more of a problem than men. The authors hypothesized that these differences were due to males being more concerned with problems outside the dyadic relationship, while females are more concerned with problems within the marital dyad.

METHOD

Procedure

Data for this study come from a national random sample of midlife married people. The names and addresses of 3,000 people were purchased from a marketing firm, with the sample being drawn from the national population of married people between the ages of 40 and 50. Questionnaires assessing different aspects of the participant's life, including marital satisfaction, health, and mental health were mailed out to the sample. Following Dillman's (2000) procedures, post cards were sent out two weeks later as a reminder. After another two weeks, a second set of questionnaires was sent out in case participants lost or never got the first set. Finally, as a last attempt to encourage participation, members of the research team made phone calls to each person that had not yet returned a questionnaire, inviting them to participate in the study.

Of the 3,000 questionnaires that were sent out, 518 were undeliverable because of bad addresses, and 566 of the sample were either not married or were not in the desired age range. Six hundred and thirty one questionnaires were returned, which represents 33.0% of the eligible sample.

Sample Characteristics

The sample consisted of 43% female and 57% male participants, and the mean age was 43.7 years old. The mean length of marriage was 13.7 years, with a range of 1 to 30 years. Sixty-four percent of the sample were in their first marriage, 27% were in there second marriages, and 9% were either in their third or fourth marriages. They had an average of 2.8 children, with a range of zero to ten. The ethnicity of the sample was 90% Caucasian, 5% African American, and 5% representing other ethnicities. Forty-three percent of the sample consisted of college graduates. Seventy-five percent reported themselves as being employed full-time, and 11% reported themselves as having part-time employment. The gross family incomes ranged from \$10,000 to over \$150,000, with a median income between \$70,000 and \$79,000.

The sample is fairly representative of the U.S. population of married people between the ages of 40 and 50. Despite the number of college graduates in the sample being above the national average, the median income of the sample is consistent with the national median income for this married age group of \$75,482 (U.S. Census Bureau, 2002). Moreover, the racial distribution of the sample is similar to other national studies. For example, in the Marital Instability over the Life Course study (Booth, Amato, Johnson, & Edwards, 1999), which is considered a nationally representative sample of adults, 89% of the members in their sample who are married and between the ages of 40 and 50 were Caucasian. This racial distribution compares favorably to the present sample.

Measures

Marital problems were assessed by asking participants to rate how often 14 potential marital issues were problems in their relationship. These areas included financial matters, ways of dealing with children, leisure activities, emotional intimacy, sexual issues, parents/in-laws, spiritual matters, communication, decision-making, commitment, values, housecleaning, gender issues/roles, and violence. Participants used a five-point scale to rate the frequency of each problem in their relationship, with the response options being never (1), very seldom (2), sometimes (3), often (4), and very often (5). The measure was developed at the Syracuse University Marriage and Family Therapy Clinic and has been used in other studies (Miller et al., 2003).

Participants were also asked to fill out the Revised Dyadic Adjustment Scale (RDAS), which is a revision of the Dyadic Adjustment Scale (DAS) (Busby, Christensen, Crane, & Larson, 1995). The RDAS has a total of 14 items that make up the consensus, satisfaction, and cohesion subscales. Previous research indicates that all of the subscales had an internal consistency of .80 or higher, with the total RDAS having a Chronback Alpha of .90 (Busby et al., 1995). The scale has been shown to have adequate validity (Busby et al., 1995).

RESULTS

Overall Frequencies

As indicated in Figure 1, the most common problems were financial matters (27.0%), sexual issues (23.8%), and ways of dealing with children (23.6%). (An issue was considered to be a problem in these analyses if the respondent reported that it was either "Very often a problem" or "Often a problem.") Emotional intimacy (18.7%), housecleaning (18.0%), and communication (15.3%) were also commonly reported. Violence (1.3%), spiritual matters (4.0%), commitment (6.0%), values (6.3%), and gender issues/roles (6.6%) were the least common problems.

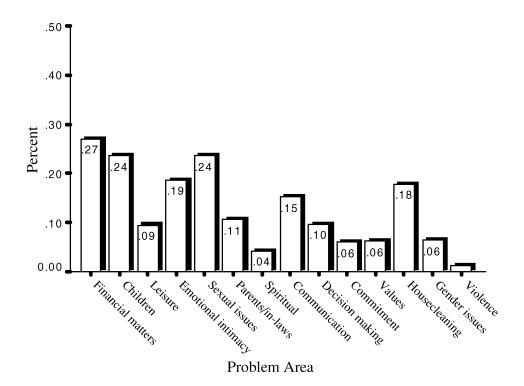


FIGURE 1. Overall frequency of marital problems.

Correlation Between Marital Satisfaction and Problems

Results of correlation between the overall Revised Dyadic Adjustment Scale score and each of the 14 problem areas indicated that all of the problem areas were significantly correlated with marital satisfaction. Values (r=-.63, p<.01), communication (r=-.61, p<.01), commitment (r=-.61, p<.01), decision making (r=-.59, p<.01), emotional intimacy (r=-.56, p<.01) and sexual issues (r=-.53, p<.01) had the strongest negative impact on marital satisfaction. Parents/in laws (r=-.19, p<.01), spiritual matters (r=-.31, p<.01), and housecleaning (r=-.35, p<.01) had the lowest correlation with marital satisfaction.

Gender Differences

Contrary to expectations, there were statistically significant gender differences in only two of the fourteen problem areas. T-tests revealed a significant gender difference in the area of communication ($t=2.033,\,p<.043$), with women reporting it as more of a problem. The other problem area was parents/in-laws ($t=-2.015,\,p<.044$), with men reporting it as more of a problem.

Although there were few statistically significant mean gender differences, there were some differences in the rank order of problems. Females and males agreed on the rank order of financial matters (1), leisure activities (8), spiritual matters (13), and violence (14). (See Table 1). However, the rank order of emotional intimacy (males, 4; females, 6), parent/in-laws (males, 7; females, 9.5), decision making (males, 9; females, 7), and values (males, 12; females, 9.5) differed by at least 2 points. Problems that varied in rank order

	Female			Male		
Rank	Problem area	%	Rank	Problem area	%	
1	Financial matters	25.9	1	Financial matters	27.8	
2	Children	23.3	2	Sexual issues	25.0	
3	Sexual issues	22.2	3	Children	23.8	
4	Housecleaning	19.2	4	Emotional intimacy	20.0	
5	Communication	17.7	5	Housecleaning	17.1	
6	Emotional intimacy	17.0	6	Communication	13.4	
7	Decision making	10.7	7	Parents/in-laws	12.0	
8	Leisure activities	9.2	8	Leisure activities	9.4	
9.5	Parents/in-laws	8.9	9	Decision making	9.1	
9.5	Values	8.9	10	Gender issues/roles	5.4	
11	Gender issues/roles	8.1	11	Commitment	4.6	
12	Commitment	7.7	12	Values	4.3	
13	Spiritual matters	5.5	13	Spiritual matters	2.8	
14	Violence	1.8	14	Violence	.9	

TABLE 1. Ranks and Percentiles of Reported Problem Areas

by one spot were, children (males, 3; females, 2), sexual issues (males, 2; females, 3), housecleaning (males, 5; females, 4), communication (males, 6; females, 5), gender issues/roles (males, 10; females, 11), and commitment (males, 11; females, 12).

In order to test whether or not the impact of specific problems on marital satisfaction varied by gender, a regression model was run that had marital satisfaction as the dependent variable, with an interaction variable of gender and each specific problem as the main independent variable. The results of the 14 regression models (one for each problem) indicated that none of the interaction variables were statistically significant, indicating that there were no gender differences in the degree to which certain problems impacted marital satisfaction.

Additional Analyses

In order to better understand problems in midlife marriages, additional analyses examined the effects that remarriage and duration of marriage had on marital problems. A Chi-square test was conducted using the variable of whether or not the current marriage was the first marriage. Participants marked a "yes" if they were in there first marriage and a "no" if the marriage they were in currently was not there first. Two out of the fourteen problems showed a significant difference between first marriages and subsequent ones. The Chi-square statistic revealed a difference in ways of dealing with children ($\chi^2 = 6.729$, p < .01) and communication ($\chi^2 = 3.864$, p < .05), with couples not in their first marriage reporting both areas at a higher problem level.

The number of years married did not affect martial problem areas. The number of years married was made a dichotomous variable, with 15 years as the cutoff between the two categories. The Chi-square statistic was used to test differences for each of the 14 problem areas. Results indicated that there were no statistically significant differences between the two categories of years married. However, communication ($\chi^2 = 3.742$ b, p = .053) approached significance, suggesting that couples in the first 15 years of marriage seemed to report communication as more of a problem than those married between 16 and 30 years.

One additional statistical test was conducted. A t-test statistic was also run to see if there was a significant difference between male's and female's levels of marital satisfaction. The results showed that there was no significant gender difference in mean RDAS scores (t = .348, p = .728).

DISCUSSION

In this study of midlife married people, the most common problem areas reported were financial matters, sexual issues, and ways of dealing with

children. Interestingly, communication was not one of the top five reported problem areas. The correlations between each of the problem areas and marital satisfaction were all statistically significant, with values, communication, commitment, decision making, emotional intimacy, and sexual issues as the most strongly correlated with marital satisfaction.

Contextual variables had a minimal impact on perceptions of marital problems. Gender played a very small role in the reported marital problems. Communication and parents/in-laws were the only problems out of the fourteen areas that had a significant gender difference, with females reporting communication more often and men reporting parent/in-laws more often as a problem. Gender did have an impact on the rank order of the some of the marital problems. Remarriage had an impact on only two problem areas, with participants in their first marriage reporting more problems with dealing with children and communication. The length of marriages was not statistically related to perceptions of marital problems.

When these results are compared with past studies, there are indications that couples' stage of life makes a difference in the frequency and impact of problems couples face. Communication was not nearly as common of a problem for midlife couples as was reported in other studies using younger populations (Storaasli & Markman, 1990; Miller et al., 2003). The study also suggests that sexuality and children are more common problem areas for this age group compared to younger populations. However, like couples in other stages of life, midlife couples commonly stuggle with finances (Whisman et al., 1997).

Midlife couples' marital satisfaction seems to be impacted by different problem areas than suggested by past studies looking at younger couples. The results of this study suggest that midlife marital satisfaction is impacted more by values, commitment, communication, and decision making than by children, as other studies have suggested about younger populations (Douglas & Douglas, 1993; Storaasli & Markman, 1990).

When the rank order of the most common problems from this study is compared to the rank order of the midlife sample in the Levenson et al. (1993) study of midlife couples, there are both differences and similarities. Their study found that the most frequent problems were, in order, children, money, communication, recreation, and sex, in their scale of ten items. In comparison, the present study found those same areas to be ranked financial matters (1), sex (2), children (3), communication (4), and leisure activities (9) out of a possible 14 areas from this study. Thus, the main differences in findings between the two groups were that sex was ranked higher and communication and leisure was ranked lower by this current sample of midlife couples.

The differences in the ranking between the two studies are probably due to using a different measure and differences in the samples. The measure used in the Levenson et al. (1993) study consisted of 10 items of conflict,

while the current study used an assessment instrument with 14 problem areas. Also, the Levenson et al. (1993) sample consisted of 35 satisfied and 47 dissatisfied couples living in a specific region of the United States. In contrast, the sample in this study was a national random sample, without a specific distressed group in the sample. With over half of the sample in the Levenson et al. study being in distressed marriages, it is probable that their sample had a lower mean level of marital satisfaction than the present sample.

Clinical Implications

The findings suggest that issues around values, communication, commitment, decision making, emotional intimacy, and sexual issues are the most destructive to marital satisfaction in midlife couples. This information will be useful in helping therapists validate what midlife couples are experiencing. Validation of couple's problems will be a building block of a strong therapeutic alliance (Hill & O'Brien, 1999; Laszloff, 2000; Lambert & Barley, 2002). Information regarding what a specific population is bringing to the session becomes valuable to the treatment process when 30% of the therapy outcome is based on the therapeutic alliance. As therapists are able to form and maintain a strong therapeutic alliance, positive treatment outcomes will increase (Horvath & Luborsky, 1993; Krupnick, Stotsky, Simmons et al., 1996).

Therapists can also use this information in assessing clients and their perceptions of the presenting problem. The therapist ability to focus on the presenting problem and allow their clients to tell their story will impact clients' overall experience with therapy. This focus will also provide pivotal moments for the client throughout therapy (Helmeke & Sprenkle, 2000; Orlinsky, Grave, & Parks, 1994).

In addition, therapists should be aware and able to deal with problems midlife couples often bring into therapy, such as financial issues, ways of dealing with children, and sexual issues, to make treatment as effective as possible. Extra training in parenting skills, financial issues, and sex therapy techniques may be needed in order to deal effectively with the most common problems midlife couples will bring to therapy.

REFERENCES

Amato, P. R., & Rogers, S. J. (1997). A longitudinal study of marital problems and subsequent divorce. *Journal of Marriage and the Family*, *59*, 612–624.

Booth, A., Amato, P. R., Johnson, D. R., & Edwards, J. N. (1999). *Marital Instability Over the Life Course: Methodology Report the Fifth Wave*. Bureau of Sociological Research.

- Braverman, S., & Paris, J. (1993). The male mid-life crisis in the grown-up resilient child. *Psychotherapy*, *30*, 651–657.
- Busby, D. M., Christensen, C., Crane, R. D., & Larson, J. H. (1995). A revision of the Dyadic Adjustment Scale for use with distressed and non-distressed couples: Construct hierarchy and multidimensional scale. *Journal of Marital and Family Therapy*, *21*(3), 289–308.
- Dillman, D. A. (2000). *Mail and Internet Surveys: The Tailored Design Method*. New York: John Wiley and Sons.
- Douglass, F. M., & Douglass, R. (1993). The validity of the Myers-Briggs Type Indicator for predicting expressed marital problems. *Family Relations*, 42, 422–426.
- Franks, M., & Stephens, M. (1996). Social support in the context of caregiving: Husbands' provision of support to wives involved in parent care. *Journal of Gerontology: Psychological Sciences*, *51B*, P43–P52.
- Geiss, S. K., & O'Leary, D. K. (1981). Therapist ratings of frequency and severity of marital problems: Implications for research. *Journal of Marital and Family Therapy*, 7, 515–520.
- Guttman, H. A. (1991). Parental death as a precipitant of marital conflict in middle age. *Journal of Marital and Family Therapy*, 17, 81–87.
- Helmeke, K. B., & Sprenkle, D. H. (2000). Clients' perceptions of pivotal moments in couples therapy: A qualitative study of change in therapy. *Journal of Marital and Family Therapy*, *26*, 469–483.
- Hermans, H. J., & Oles, P. K. (1999). Midlife crisis in men: Affective organization of personal meanings. *Human Relations*, *52*, 1403–1425.
- Hill, C. E., & O'Brien, K. M. (1999). *Helping skills: Facilitating exploration, insight, and action*. Washington, DC: American Psychology Association.
- Horvath, A. O., & Luborsky, L. (1993). The role of the therapeutic alliance in psychotherapy. *Journal of Consulting and Clinical Psychology*, *61*, 561–573.
- Hoyert, D., & Seltzer, M. (1992). Factors related to the well-being and life activities of family caregivers. *Family Relations*, 41, 74–81.
- Krupnick, J. L., Stotsky, S. M., Simmons, S., Moyer, J., Watkins, J., Elkin, I., & Pilkonis, P. A. (1996). The role of the therapeutic alliance in psychotherapy and pharma-cotherapy outcome: Findings in the National Institute of Mental Health Treatment of Depression Collaborative Research Program. *Journal of Consulting and Clinical Psychology*, 64, 532–539.
- Kurpius, S. E., Maresh, S. E., & Nicpon, M. F. (2001). Mood, marriage, and menopause. *Journal of Counseling Psychology, 48*, 77–84.
- Laszloff, T. A. (2000). The implications of client satisfaction feedback for beginning family therapist: Back to the basics. *Journal of Family Therapy*, 26(3), 391–397.
- Lambert, M., & Barley, D. (2002). Research summary on the therapeutic relationship and psychotherapy outcome. In J. C. Norcross (Ed.), *Psychotherapy relationships that work: Therapist contributions and responsiveness to patients* (pp. 17–32). Oxford: University Press.
- Levenson, R. W., Carstensen, L. L., & Gottman, J. M. (1993). Long-term marriages: Age, gender, and satisfaction. *Psychology and Aging*, *8*, 301–313.
- Loomis, L., & Booth, A. (1995). Multigenerational caregiving and well-being: The myth of the beleaguered sandwich generation. *Journal of Family Issues*, 16, 131–148.

- Lowenstein, A., & Gilbar, O. (2000). The perception of caregiving burden on the part of elderly cancer patients, spouses and adult children. *Families, Systems & Health*, 18(3), 337–346.
- Matthews, K. A. (1992). Myths and realities of the menopause. *Psychosomatic Medicine*, 54, 1–9.
- Miller, R. B., Yorgason, J. B., Sandberg, J. G., & White, M. B. (2003). Problems that couples bring to therapy: A view across the family life cycle. *American Journal of Family Therapy*, *31*, 395–407.
- Orlinsky, D. E., Grave, K., & Parks, B. K. (1994). Process and outcome in psychotherapy-Noch einmal. In A. E. Bergin & S. L. Garfield (Eds.), *Handbook of psychotherapy and behavior change* (pp. 257–310). New York: Wiley.
- Scharlach, A. E., & Fredriksen, K. I. (1993). Reaction to the death of a parent during midlife. *OMEGA*, 27(4), 307–319.
- Storaasli, R. D., & Markman, H. J. (1990). Relationship problems, in the early stages of marriage: A longitudinal investigation. *Journal of Family Psychology*, *4*, 80–98.
- Suitor, J., & Pillemer, K. (1994). Family caregiving and marital satisfaction: Findings from a 1-year panel study of women caring for parents with dementia. *Journal of Marriage and the Family*, *56*, 681–690.
- Tornatore, J. B., & Grant, L. A. (2002). Burden among family caregivers of persons with Alzheimer's disease in nursing homes. *Gerontologist*, 42, 497–506.
- Umberson, D. (1995). Marriage as support or strain? Marital quality following the death of a parent. *Journal of Marriage and the Family*, *57*, 709–723.
- U.S. Census Burea. (2002, march). *Age of Reference Person, by Total Money Income in 2001, Type of Family, Race, and Hispanic Origin of Reference Person*. Retrieved July 2, 2003, from CPS Annual Demographic Supplement Online via FERRET: http://ferret.bls.census.gov/macro/032002/faminc/new02_006.htm
- Ward, R. A., & Spitze, G. (1998). Sandwiched marriages: The implications of children and parent relations for marital quality in midlife. *Social Forces*, 77(2), 647–666.
- Waskel, S. A. (1991). Intensity of midlife crisis on responses to the death concern scale. *The Journal of Psychology*, *126*(2), 147–154.
- Wethington, E. (2000). Expecting stress: Americans and the "midlife crisis." *Motivation and Emotion*, *24*, 85–102.
- Whisman, M. A., Dixion, A. E., & Johnson, B. (1997). Therapists' perspectives of couple problems and treatment issues in couple therapy. *Journal of Family Psychology*, 11, 361–366.
- White, L., & Edwards, J. N. (1990). Emptying the nest and parental well being: An analysis of national panel data. *American Sociological Review*, *55*, 235–242.

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