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INITIATOR STATUS AND THE PROPORTION OF FAMILY

MEMBERS IN THE SOCIAL SUPPORT NETWORK:

THEIR IMPACT ON ADJUSTMENT TO MARITAL SEPARATION

By

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ABSTRACT

INITIATOR STATUS AND THE PROPORTION OF FAMILY MEMBERS IN THE SOCIAL SUPPORT NETWORK: THEIR IMPACT ON ADJUSTMENT TO MARITAL SEPARATION

By

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This study examined the extent of depressive symptomatology related to initiator status and the proportion of family members in the social support network of 56 newly separated volunteer subjects. Using ANOVA, initiator status alone was not found to be a significant predictor of depressive symptomatology. Using Pearson Product-Moment correlations, an interaction between initiator status and the proportion of family members in the social support network was found to be significant. For initiators, a high proportion of family members in the support network was related to increased depression ($r = .22$), while for noninitiators a low proportion of family members was related to increased depression ($r = .-39$). It is suggested that this reflects the importance of social integration and the impact negative social interactions can have during the adjustment to marital separation.

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INTRODUCTION

Though antecodotal evidence has long suggested
that strong social ties can help ease a person through
difficult times, only in the past two decades has
research focused on the relationship between negative
life events and depression, and the ability of social
support to mediate this relationship. Eckenrode and
Gore (1981) have suggested that the development of the
Social Readjustment Scale (SRS) and the Schedule of
Recent Experiences (SRE) by Holmes and Rahe (1967)
served to formalize the study of life events and
well-being. Subsequently, the occurrence of negative
life events has been correlated with increased risk of
numerous physical and psychological disorders,
including (but not limited to) death, cancer, heart
attacks, pregnancy disorders, tuberculosis, leukemia,
diabetes, acute schizophrenia, anxiety, and depression
(Cohen, 1988; Cohen & Syme, 1985; Dohrenwend &
Dohrenwend, 1974; Gottlieb, 1981; Habif & Lahey, 1980;
Rabkin & Struening, 1976). While by no means causal
(or even consistent), enough epidemiological and
correlational evidence has accumulated to support

a relationship between life events and well-being (Gottlieb, 1981; Oatley & Bolton, 1985).

Short of the death of a spouse, perhaps the most significant life stress an individual may encounter is the dissolution of a marriage (Holmes & Rahe, 1967). Within divorce, the time surrounding the separation has been isolated as the most disruptive period of the divorce process, and is related to a number of deleterious physical and psychological outcomes (Bloom, Asher, & White, 1978; Caldwell & Bloom, 1982; Goode, 1956; Pearlin & Johnson, 1977). Of the psychological responses to separation, depression is most typically observed (Bloom et al., 1978; Pearlin & Johnson, 1977). Yet there is variability in individual responses to the specific stress of separation that parallels findings of variability of response in all life stress-well being relationships: not all people ending marriages experience the same degree of depression (Caldwell & Bloom, 1982; Pettit & Bloom, 1984). Thoits (1982) has noted that the correlations found between life stress and well-being are typically moderate, ranging from .17 to .35; an earlier study (Rabkin & Struening, 1976) concluded that this correlation was .30 at most. These correlations show that "some individuals who

experience many events do not become distressed, whereas others who experience very few events become highly distressed" (Hinkle, 1974, in Thoits, 1982).

Stressful life events such as marital separation alone, then, can not completely predict the onset or severity of depression. Some attempts to understand the variation in response to life stress have focused on external, environmental factors that could account for differing responses (Cohen & Syme, 1985), while other research has searched for internal, individualistic predispositions to depression (Abrahmson, Seligman, & Teasdale, 1978). Likewise, in the search for understanding the varied responses to marital separation, both external mediators (such as social support) and internal mediators (such as initiator status) have been examined.

Definitions of Social Support

Social support is currently the factor most often claimed to mediate the life stress-depression relationship (Oatley & Bolton, 1985). The rapidly increasing body of research attests to the appeal of social support as a mediating variable. Despite the popularity of this area (or perhaps because of it), it is difficult to present a unitary concept of social

support. No single theory drives the research in this area. Thus, research involving social support has been rightfully criticized as "characterized by a diversity of definitions, methodologies, and theories" (Leavy, 1983), as "operationalized in a somewhat bewildering assortment of ways" (Wilcox, 1981), and as "often so vague or so broad that the concept is in danger of losing its distinctiveness" (Barrera, 1986). In reviewing individual, specific definitions, however, it is possible to arrive at a global understanding of this concept.

Most simplistically, Cohen and Syme (1985) defined social support as "resources provided by other persons". Cobb (1976) stated that social support is anything that causes a person to believe he or she is cared for or esteemed. Barrera (1986) argued that all social support definitions can be organized into 3 categories: social embeddedness, perceived social support, and enacted support. "Social embeddedness" refers to the presence or absence of significant others in an individual's social environment, and is typically measured by broad indices, such as density (interrelatedness) of the social network, marital status, number of siblings, and contact with friends. Social embeddedness assesses the potential for social

support. "Perceived support" represents the individual's assessment of the support network, and is measured along two dimensions: perceived availability and adequacy of support. No measure of the size of the social network or the frequency of contact is taken; perceived social support focuses on quality of support rather than quantity, and is always measured subjectively (Barrera, 1986). Perceived social support is sometimes called "available support". "Enacted support" is defined as the specific actions that others perform when they render assistance; this is to be differentiated from perceived support as discussed above. Enacted support can be measured objectively by an observer, but is typically measured through subjective means such as self-reports (Barrera, 1986).

In a similar manner, House and Kahn (1985) divided definitions of social support as "structural" (which generally equates with social embeddedness) and "functional" (which generally equates with the combination of perceived social support and enacted support). Research into structural aspects of the social support network typically examine the number of supporters, the relationship of the supporter to the individual, the interrelationships among supporters,

and the frequency of contact among supporters.

Even in the absence of a consensual definition, numerous studies have shown correlations between social support and psychological well-being, such that this relationship is generally accepted (Barrera, 1986; Billings & Moos, 1982; Cohen & Wills, 1985). This is especially so when depression is utilized as a measure of well-being, where the lack of a confiding relationship is strongly associated with symptomatology (Leavy, 1983). The process by which social support reduces the impact of negative life events is conceived to occur in one of two manners: the "direct" (or "main") effect and the "buffering" effect. Though often thought to be competing, both the direct effect hypothesis and the buffering hypothesis have received empirical support (for reviews, see Cohen & Syme, 1985; Cohen & Wills, 1984; Leavy, 1983).

Definitions and conceptualizations should not be limited to viewing all support as positive. Rook (1984) has discussed the often overlooked negative aspects of social interaction and notes that the reverse of the buffering hypothesis (i.e., that unsupportive social relationships may potentiate stressful situations and increase symptomatology) has

not been adequately tested. In her study of elderly women, she found that negative social interactions were more strongly associated with decreases in well-being than positive social interactions were with increases in well-being (Rook, 1984). Rook's study suggests suggests that a network which is not only unable to be supportive but additionally is a source of stress itself may have a greater detrimental impact on adjustment than the positive impact gained by a supportive network. Her study suggests that the social support network may be related to adjustment in both positive and negative ways.

Lieberman (1986) has suggested that the "psychologizing" of social support by a movement away from initial sociological constructs may be responsible for the wide variety of definitions.

"Increasingly, the move is away from structural conceptions and toward functional perspectives. It is this refocus, away from structural aspects of the social condition toward an increasing specification of the qualities and characteristics of social transactions, that creates the current conceptual and methodological dilemma for social support researchers. Because research direction is away from a specification of social structure and toward a focus on the nature of the relationship between those who provide help and those who receive help, social support research enters the realm of formal psychology" (page 461).

This move away from the concept of social embeddedness allows for the study of highly specific relationships at the cost of a unitary, global knowledge (Lieberman, 1986). Returning to a broader, structural base of study may allow more conclusive statements about the effect of social support to be made. Divorce, for example, is one life stress that affects not only the individual but the structural qualities of his or her social support network (Wilcox, 1981).

A Structural Aspect of Social Support: Network Density

Caldwell and Bloom (1982) have suggested that the dominant factor in the structure of the social support network is the source of the support (e.g., friends, family, coworkers). Hirsch (1980) also has suggested that structural features of the social support network may be most related to adjustment outcomes, positing that network density may be the most important structural feature. Density refers to the interconnections of members of the social support network. Density has been theoretically defined as "the extent to which the members of an individual's social network know and contact one another independently of the individual" (Walker, MacBride &

Vachon, 1977, p. 35). A more formal, mathematical definition by Hirsch (1981) is "the proportion of actual to potential relationships that exist among the members of an individual's network" (p. 157). In some studies, density has been found to exert a paradoxical effect on adjustment: dense social support networks may be inversely related to psychological adjustment. Walker et al. note that while a small, dense network may be effective in providing support for an individual at one time, it may lose the ability to do so at another time, especially during crises involving a major psychosocial transition. This suggests that functional aspects of the social support network are affected by the structural aspects. Walker et al. (1977) speculate that smaller, dense networks "entrap the individual within a limited set of normative expectations, information and social contacts" (p. 37). Similarly, Cohen and Wills (1985) note that larger social networks (and thus those that are potentially less dense) allow individuals to experience a greater number of positive interactions and maintain a stable set of socially rewarding roles. Recent research has lent support to these concepts. In studying low-income mothers, Belle (1982) found that a dense support network is not

protective of mental health, perhaps because of accompanying demands made upon the individual. Conversely, Gallo (1983) has found that density was positively correlated with the physical health status (which presumably does not have a concomitant set of normative expectations) of a sample of elderly adults, as was size of the social support network.

Hirsch (1981) found that for women a low density social support network was more conducive to positive adjustment to life stress than a high density network. He hypothesized that this effect may occur because a major life change will have a much greater impact on an individual's social support network if that network is highly interconnected, as is with a high proportion of family members; in a sense, changes for an individual will radiate to the network as a whole. A less dense network may serve as an "insurance policy" in that a greater access to positive alternative social identities may be provided and nonfamily interests may be less threatening. This implies that a more dense network values and supports stable social identities, a maintenance of relationships in the status quo.

Marital Disruption and Network Density

Thus, though it is bounded by conceptual and methodological constraints, both positive and negative aspects of social support appear to mediate the relationship between life events and well-being. Nowhere may the impact of life events be more apparent than during marital separation, an event that places demands not only on the individual but on the social support network as well. Density is one aspect of the social support network which has been isolated as a mediator. Several studies have examined the role of the density of the social support network in the adjustment to marital disruption. Wilcox (1981) found that a less dense network leads to better post-marital adjustment; further, Wilcox found that the less adjusted group contained a higher proportion of family members than the better adjusted group. A higher proportion of family members in the social support network leads to a higher density network.

The structure of the social support network may be influencing the functional aspects of the network. Wilcox's explanation for why density affects adjustment, drawing from Goode (1956) and Weiss (1975), is that family members have a more difficult time accepting that the marriage is over and may feel

more anger about the situation, both factors which
would decrease their ability to provide effective
support. Similarly, Spanier and Hanson (1982) have
reviewed the literature and suggest that family
members may respond to a marital separation by
hesitating to become involved, taking sides, acting in
unpredictable ways, or placing a stigma on the
individual. In their study of 291 separated adults,
they found that kin support was negatively and
significantly correlated with the adjustment to
separation ($r = -.16$, $p < .05$), and negatively (though
non-significantly) correlated with life satisfaction.
They speculated that this effect occurs because kin
may be unaware of the marital distress until a
decision to separate is announced, and thus are unable
to give effective support at critical periods during
the marital disruption. In this view, the family
members in the social support network might be
reactive only, having little influence or impact on a
process already begun. Thus, paralleling Walker et
al., their opinions, evaluations, and criticisms may
be both undesired and a source of additional stress
(Spainer & Hanson, 1982). These opinions,
evaluations, and criticisms are not unlike the
negative social interactions described by

Rook (1984). Additionally, as Wilcox (1981) has
noted, the decision to dissolve a marriage often
affects not only the individual but the social support
network; as the separation radiates outward through
the network, the proportion of the network comprised
of family members will be experiencing a disruption as
well, and may be unable to provide support. Thus,
adjustment to marital separation is influenced by
density, and particularly by the number of family
members in the social support network.

Initiator Status

Initiator status (i.e., whether or not one made
the decision to terminate one's marriage) has been
found to account for some individual differences in
adjustment after marital separation (Pettit & Bloom,
1984). In their review of studies investigating
initiator status, Pettit and Bloom noted that
initiator status can be related to a number of issues,
primarily the perception of personal control. Wortman
(1975) found that an experimental group who knew both
what outcome they desired to obtain and were able to
cause a particular outcome perceived themselves as
having more control than an experimental group which
was not able to cause a particular outcome; she later

concluded that perceived control has a positive impact on adjustment to outcomes (Wortman & Brehm, 1975). Perceived control has been examined in women with breast cancer, with the perception of cognitive control and behavioral control over the course of the disease both significantly associated with increased psychological adjustment (Taylor, Lichtman, & Wood, 1984). Perceived control played a central role in the creation of the learned helplessness theory of depression, and has been carried into the reformulated attributional theory; perceived control is viewed as one of three crucial elements in determining the predisposition to depression (Abramson et al., 1978; Abramson, Metalsky, & Alloy, in press). In this theory, "hopelessness" is considered a proximal and sufficient cause of one subtype of depression: hopelessness depression. The formation of a state of hopelessness depends on the attributional style of the individual; when negative life events are consistently attributed to internal, stable, and global causes rather than external, unstable, specific causes, a predisposition to hopelessness depression occurs (Abramson et al., in press). The reformulated attributional theory centers, therefore, on control of the cause of difficulties. Thus, the issue of control

is related to both initiator status and depression;
depression following marital separation may be
influenced in part by the sense of control a person
feels over the separation.

Perceived control over marital separation has
been discussed by Goode (1956), who observed a
connection between which spouse initiated the
separation and adjustment: mutual decisions to
separate were least traumatic for both individuals
involved. Pettit and Bloom (1984), in review,
concluded that there was strong evidence that
perceived control over the decision to separate
enhances the likelihood of positive adjustment to the
separation. In their study of perceived control, they
found that initiator status is able to account for a
significant proportion of the variance along some
measures of adjustment but not others. Two months
following the separation, initiators reported fewer
total postseparation problems, fewer self-concept
problems, and more perceived benefits from the
separation, even though initiators and noninitiators
did not differ on measures of preseparation marital
dissatisfaction. These effects were particularly
salient for women. However, Pettit and Bloom failed
to find significant differences between initiators and

noninitiators using the Composite Symptom Checklist, a global measure of psychiatric symptomatology developed by Bloom and Caldwell. The Composite Symptom Checklist (Bloom & Caldwell, 1981; Caldwell & Bloom, 1982) was specifically designed for use in assessing reaction to marital disruption. A cluster analysis of the CSC revealed two stable factors, Neurasthenia and Anxiety, with coefficient alphas of .81, and .72 respectively (Bloom & Caldwell, 1981). Thus, Pettit and Bloom saw benefits for the initiator in some measures of adjustment, but these benefits did not extend to global psychiatric symptomatology.

The decision to terminate a marriage is not an easy one, and the negative consequences of separation are well documented (Bloom et al., 1978). The effects of this change of social status, like any other life change, could be expected to be eased by social support. High density social networks appear to provide support for normative expectations rather than social change while a low density social network appears more able to be supportive of change (Walker, et al., 1977). But the functional aspects of the social support network may be influenced by the structure of the network. Initiators, by definition, have taken control and chosen to terminate a marriage,

thus bringing change upon themselves and their family members: they will require a network supportive of change, or a low density network, to ease the transition. Thus, a social support network with a low proportion of family members (and therefore a high proportion of nonfamily members) should facilitate adjustment. Noninitiators, alternatively, have had the marital separation thrust upon them and require a network able to provide stability and consistent role relationships: they require a network supportive of normative expectations, or a high density network. Thus, a social support network with a high proportion of family members should facilitate adjustment. By combining initiator status with the proportion of family members in the social support network, a more precise prediction of the response to marital separation should be achieved.

Hypotheses

There is a well established relationship between life stress and psychological adjustment. Marital separation has been found to be a life stress of extreme proportion, and depression is a typical outcome of this stress. There is variability in the response to marital separation, however; negative

outcomes have been mediated by both internal factors
(e.g., initiator status) and external factors (e.g.,
structural features of the social support network such
as proportion of family members). Both of these
factors have been shown to account for variation in
adjustment in response to marital separation. Based
on the recent literature concerning the relationship
between control and depression (Abramson et al., 1978;
Abramson et al., in press), using depression as a more
specific indicator of adjustment than a global symptom
checklist may differentiate initiators and
noninitiators.

The main focus of this study is to examine the
interaction of an internal (initiator status) and
external (structure of the social support network)
variable on depressive symptomatology following
marital separation; it will specifically study, for
both initiators and noninitiators, the effect of the
proportion of family members in the social support
network. Viewing this interaction should allow for a
more precise prediction of subsequent depressive
symptomatology than use of either initiator status or
density variable alone. Based on the above
literature, it is hypothesized that:

(a) because depression can be anticipated

following marital separation (Bloom et. al., 1978; Pettit & Bloom, 1984), and because of the connection between control and depression posited in the reformulated attributional theory (Abrahmson et al., 1978), initiators of marital separation will exhibit less depressive symptomatology than noninitiators, and

(b) there will be an interaction between initiator status and the proportion of social support network comprised by family members when measuring depression. Within both initiators and noninitiators, the proportion of family members in the social support network will be related to adjustment, such that initiators with a high proportion of family members in the social support network will exhibit more depressive symptomatology than initiators with low proportion of family members in the social support network. Conversely, noninitiators with a low proportion of family members in the social support network will show more depressive symptomatology than noninitiators with a high proportion of family members in the social support network.

METHOD

Subjects

Participants in this study were part of a larger Family Studies Project examining cross-generational effects of marital disruption, ongoing at Michigan State University. Subjects were recruited through letters describing the thrust of the study sent to those who might come in contact with persons experiencing marital disruption or separation, (e.g., clergy, lawyers, and mental health professionals). Additional letters were sent to the Lansing Friend of the Court, and newspaper advertisements were placed in local papers. From the total of individuals responding, a sample was obtained of 56 adults who met the following criteria for inclusion: (a) a separation within 12 months prior to the study, and (b) the marriage is the first marriage. Five separated couples were included, interviewed independently. Given the number of divorces that occur each year, this is a small sample. However, low response rates appear to be typical of recent studies of marital separation (Spainer & Hanson, 1982).

Procedure

All data collection was carried out by graduate and undergraduate students who received training prior to interviewing subjects. Potential subjects were called and interviewed by phone to ascertain appropriateness for inclusion. Each participant was then interviewed face to face. These interviews required approximately 1-2 hours and collected information on subject demographics, initiator status, current psychological functioning level, life satisfaction, and social support network characteristics. To insure coding accuracy, each interview was coded by two independent raters, and a third independent rater resolved any discrepancies that arose. Subjects were also given several measures to complete that utilized optical scan data sheets. For a more complete discussion of the coding process, see Appendix A.

All analyses were computed using Statistical Procedures for Social Scientists - Tenth Edition (SPSS-X).

Operationalization of Variables

The first independent variable, initiator status, was determined by asking the subject "Whose decision

was it to separate?". Responses were coded into four
categories: "completely mine", "mostly mine",
"mutual", or "mostly spouses". Following Pettit and
Bloom (1984), initiators were categorized as those who
responded "completely mine" or "mostly mine".
However, unlike Pettit and Bloom, subjects who
indicated the decision to separate was mutual were
treated as noninitiators. Pettit and Bloom
categorized mutuals based on a comparison of outside
variables between mutuals as a whole with initiators
and noninitiators. These hypotheses focus in part on
the issue of control, and mutuals by definition are
sharing the decisions influencing their lives.

The second independent variable, the proportion
of family members in social support network, was
determined by examining the responses given to
questions concerning the social support network. The
structure of the social support network was measured
by a questionnaire similar to that devised by Norbeck
(1982). Each subject was asked to list up to 20
people who provided them with some form of support
during the separation. For each supporter listed,
subjects were also asked to describe the type of
support given, the relationship of this person to
them, and the frequency of contact. The proportion of

family members was then determined by dividing the number of family members in the network by the total number of supporters. Family was defined as spouse, all blood relatives, and stepchildren. In-laws and all non-family members listed in the social support network were considered as friends.

Adjustment to marital separation was assessed using the Center for Epidemiological Studies-Depression Scale (Radloff, 1977), utilizing computer opscan sheets for scoring. As part of the larger Family Studies Project, subjects were asked to complete the CES-D both as they recalled feeling at the time of separation and as they felt at the time of the interview. This thesis is based on the current depressive symptomatology as reported at the time of interview. The CES-D is a widely used measure that has shown consistent reliability and validity across population demographics in detecting affective symptom of depression (Radloff, 1977). Radloff (1977) found coefficient alphas for the CES-D to center about .85, with Spearman-Brown coefficients centering about .86. One recent study examining depressed mood in married people found the CES-D to have an alpha reliability of .85 for women and .83 for men (Ross & Mirowsky, 1984).

Demographic Characteristics of the Sample

Characteristics of the subjects who agreed to participate in this study are presented in Table 1. Subjects were predominantly female, married an average of 12.15 years, and had received education at the college level. The length of marital difficulties prior to separation averaged 4.2 years, and the mean length of separation at the time of interview was 306 days. Though the sample as a whole was largely female, a significantly higher proportion of initiators were female (p = .019). This mirrors a consistency previously noted in the literature on marital separation (Pettit & Bloom, 1984). Additional differences between initiators and noninitiators were found in education, income, and custody of children; however, these variables also correlated with gender (respectively: r = .24, p = .081; r = .56, p < .001; r = -.33, p = .013). To further understand these differences, separate comparisons of male and female initiators and noninitators were made (see Table 2 and Table 3), which revealed only one significant difference: female initiators were significantly younger than noninitiators. Thus the differences found in the total sample appear more related to the gender distribution than to initiator status.

Table 1

<u>Demographic Characteristics of the Total Sample</u>

<u>Variable</u>	<u>Init.</u>	<u>Noninit.</u>	<u>Sig.</u>
Age (yrs)	35.3	39.2	ns
(%) Female	88.4	56.6	.02(a)
Income (per month)	1072.0	1867.9	.02
Education (yrs)	13.6	15.1	.02
Length of Marriage (yrs)	11.1	13.8	ns
Length of Separation (days)	365.6	255.8	ns
Length of Problems(b)	4.6	3.8	ns
Length of Problems(c)	5.7	4.7	ns
Parents (%)	80.0	80.0	ns(a)
Number of children	2.3	2.2	ns
Custody (%)(d)	76.9	40.0	.02(a)

Note: Some variables do not total 56 cases due to missing data. Significance tested using Fisher t-test, two-tailed.
(a) Significance tested using Chi-Square.
(b) Period between onset of difficulties and separation
(c) Period between onset of difficulties and interview
(d) Full or partial custody.

Table 2

<u>Demographic Characteristics of the Male Subjects</u>
<u>in Sample (N = 16)</u>

Variable	Init.	Noninit.	Sig.
Age (yrs)	39.3	37.1	ns
Income (per month)	2166.7	2569.2	ns
Education (yrs)	14.0	15.5	ns
Length of Marriage (yrs)	8.7	12.2	ns
Length of Separation (days)	453.3	262.6	ns
Length of Problems (yrs)(a)	5.4	4.1	ns
Length of Problems (yrs)(b)	6.7	5.2	ns
Parents (%)	18.7	68.7	ns(c)
Number of children	3.3	2.2	ns
Custody (%)(d)	12.5	18.7	ns(c)

Note: Some variables do not total 16 cases due to missing
data. Significance tested using Fisher t-test,
two-tailed.
(a) Period between onset of difficulties and separation
(b) Period between onset of difficulties and interview
(c) Significance tested using Chi-Square.
(d) Full or partial custody.

Table 3

Demographic Characteristics of the Female Subjects
in Sample (N = 40)

Variable	Init.	Noninit.	Sig.	
Age (yrs)	34.8	40.9	.03	
Income (per month)	922.7	1260.0	ns	
Education (yrs)	13.6	14.7	ns	
Length of Marriage (yrs)	11.5	15.1	ns	
Length of Separation (days	351.6	250.9	ns	
Length of Problems (yrs)(a)	4.5	3.7	ns	
Length of Problems (yrs)(b)	5.5	4.4	ns	
Parents (%)	52.5	32.5	ns	(c)
Number of children	2.2	2.2	ns	
Custody (%)(d)	45.0	22.5	ns	(c)

Note: Some variables do not total 40 cases due to missing
data. Significance tested using Fisher t-test,
two-tailed.
(a) Period between onset of difficulties and separation
(b) Period between onset of difficulties and interview
(c) Significance tested using Chi-Square.
(d) Full or partial custody.

No county, state or national statistics on separated persons are available, and demographics of those receiving judgements of divorce are sparse as well. When compared to the 1,388 divorces finalized within Ingham County or the 39,458 divorces finalized within Michigan during 1986 (the most recent year that figures are available), it is apparent this is a small sample.

This sample is comprised of a higher proportion of females and earns a higher income than Ingham County as a whole. No comparisons to separated people within the county can be made, nor is it not possible to partition Ingham County statistics soley for the adult population. Because of this, there remains an uncertainty about the representativeness of this sample, with no method available to make a comparison of the separated persons who agreed to participate in this study from the whole of separated persons within Ingham County. In comparison to a previous study of marital separation (Bloom & Hodges, 1981), demographics are reported which appear similar to the demographics of this study (see Table 4). Thus, while questions remain, it appears this sample is generally consistent with both the demographics of the area it was drawn from, the data available on divorces in the

Table 4

Demographic Comparisons of the Sample

Variable	This Sample	Bloom & Hodges	Ingham County	Mich Divorces
N	56	153	N/A	39458
Age(a)	37.4	31.8	25.3	34.8
% Employed	82.1	84.3	88.6	N/A
%Male	29	42	48	N/A
% White	97	77	89	N/A
Education (yrs)	14.4	15.7	(b)	12.4
Income(c)	$1492	824	921	N/A
Marriage Length (in months)(d)	150.9	112.6	N/A	66.0
Children(e)	2.2	1.1	N/A	1.6

Note: "Bloom & Hodges" refers to Bloom & Hodges (1981). "1986 Divorces" refers to data from divorces within the State of Michigan during 1986, drawn from the State of Michigan Office of the State Registrar and Center for Health Statistics (Department of Public Health) Table 4MP, Table DA3, and Table A-6. "Ingham County" refers to 1986 demographics of Ingham County in full, not of those who are separated or divorced, and are drawn from the 1980 U.S. Census, the latest figures available. State and County statistics which are unavailable or inappropriate are noted as "N/A".
(a) Median age males for Michigan statistic; median age total for Ingham County.
(b) 78% of the population of Ingham County has at least 12 years of education; 26% has at least 16 years of education.
(c) Monthly; income for this sample and Ingham County is total income; income for Bloom & Hodges is spendable income.
(d) Length of Marriage at time of separation; Michigan statistic is median rather than mean.
(e) Percentages calculated for those with children.

State of Michigan, and previous studies on marital
separation.

RESULTS

Results of Measures of the Independent Variables

Using responses given to the question "Whose decision was it to separate?", subjects were categorized as initiators or noninitiators as described above. Twenty-six subjects, or 46.4% of the sample were classified as initiators and 30 subjects, or 53.6% of the sample were classified as noninitiators. Of the 56 subjects, 5 persons or 8.9% of the sample reported the decision had been mutual and were classified as as noninitiators. Five couples were included in the sample, with 100% agreement upon initiator status.

Responses to the social support questionnaire were used to determine the proportion of family members in the social support network, which had a mean of .33 and a range from .00 to .72. These proportions were uncorrelated with initiator status ($r = .20$, $p = .134$). Some changes of those included as members of the social support network had occurred since the time of separation; correlations between initiator status and the proportion of family members controlling for length of separation were still nonsignificant ($r = -.15$, $p = .131$). Thus, the

proportion of family members and initiator status may be considered independent.

Depression was measured by the CES-D, with a mean item endorsement of 1.37, ranging from .20 to 2.25. Over the 20 item scale, this converts to a mean score of 27.34, with a range from 4.00 to 45.00. For this administration of the CES-D, Cronbach's alpha reliability was found to be .84; this is consistent with the findings of Radloff (1977) and Ross and Mirowsky (1984).

Gender was not signficantly correlated with either the proportion of family members in the social support network (r = .05, p = .735) or depression (r = .03, p =.851), therefore subsequent analyses will be reported without regard to this variable.

Test of Hypothesis A

The hypothesis that initiators and noninitiators would differ in the amount of depressive symptomatology present at the time of interview as measured by the CES-D was not supported when tested by a one-way Analysis of Variance (see Table 3). Mean scores on the CES-D were 29.56 for initiators and 25.46 for noninitiators.

Table 5

Analysis of Variance: Depression by Initiator Status

Source	df	MS	F	Sig.
Main Effects				
Initiator Status	1	.541	1.815	.184
Residual	50	.298		
Total	51	.303		

Test of Hypothesis B

With no consideration of initiator status, the proportion of family members in the social support network and depression appear unrelated (r = .-11, p = .448). However, as can be seen in Table 6, the hypothesis that the relationship between proportion of family members in the social support network and depression would differ for initiators and noninitiators was supported. For initiators and noninitiators, separate Pearson Product-Moment correlations were computed between depression (as measured by the CES-D) and the proportion of family members in the social support network. For initiators, it was found that depressive symptomatology increased moderately with increases in the proportion of family members in the social support network (r = .22, p = .150). For noninitiators this relationship was clearly inverted: the amount of depressive symptomatology decreased significantly with higher proportions of family members in the social support network (r = -.39, p = .020).

The difference in correlations between initiators and noninitiators was tested by a one-tailed Fisher's Z-transformation of r (Glass & Stanley, 1970). The difference in correlations of .61 was found to be

Table 6

<u>Relationship between Proportion of Family Members
in Social Support Network and Depression</u>

	Correlations				
	Init.	Noninit.	Diff.	N	Sig.
Pearson Product Moment Correlation	.22	-.39	.61	52	.016
Controlling for:					
Length of Separation	.21	-.41	.62	44	.024
Length of Problems(a)	.30	-.48	.78	38	.011
Length of Problems(b)	.31	-.50	.81	39	.007

Note: Significance determined using Fisher's
Z-transformation of $\underline{r}$, one-tailed (Glass & Stanley, 1970)
(a) Determined using the period between onset of
difficulties and the separation
(b) Determined using the period between onset of
difficulties and the interview

significant at p = .016.

Similar results were found when controlling for the length of separation, with the difference in correlations of .62 significant at p = .024. The length of separation was controlled for because of influences on adjustment that could occur independent of initiator status and proportion of family members. When controlling for the length of time between the onset of difficulties and the decision to separate (which can be conceived as how quickly control was seized by the initiator), these correlations increased slightly for both initiators (r = .30, p = .111) and noninitiators (r = -.48, p = .009), a difference significant at p = .011. When controlling for the overall length of time since the onset difficulties (again, due to the possibility of influences on adjustment independent of initiator status or the proportion of family members in the social support network), the correlations between proportion of family members in the social support network and depressive symptomatology rose slightly again; r = .31, p = .106 for initiators and r = -.50, p = .005 for noninitiators, a difference significant at p <.007.

DISCUSSION

It is clear that the relationship between social support and adjustment is not simplistic. It should be noted that, as a whole, the sample exhibited enough symptomatology (mean CES-D = 27.30) to be described as clinically "depressed" (Radloff, 1977). Bloom et al. (1978) have observed the extremely difficult transition that marital separation presents for most adults, and the impact of this transition appears to extend beyond the boundaries of initiator status; neither initiator status nor the proportion of family members in the social support network alone appear able to prevent the onset of depression following marital separation. When specifically using depression as a dependent variable because of the the issue of perceived control, no differences were found between those who initiate marital separation and those who do not. Perceived control may not be a sufficient variable in predicting adjustment to stressful events or may be a simplistic accounting of the process which culminates in the decision to separate. While initiators have taken some degree of control, control may not be the primary reason for the decision to separate. There may be many pathways

which terminate in this decision; likewise, there may
be many pathways beyond a yielding of control which
end in the decision not to initiate a separation.
However, this failure to find significant differences
does replicate and extend the study of Pettit and
Bloom (1984), who found no differences associated with
initiator status when measuring global
symptomatology. Additionally, this finding lends weak
anecdotal support to the reformulated attributional
theory; control is just one of three necessary but
nonsufficent independent tenets proposed to influence
the predisposition toward depression (Abramson et al.,
1978; Abramson et al., in press).

The second, and primary, hypothesis of this study
was supported. As noted, neither initiator status nor
the proportion of family members in the social support
network are alone able to predict the presence of
depressive symptomatology; likewise, neither are able
to significantly predict the severity of depressive
symptomatology. However, clear differences emerge in
the interaction: the proportion of family members in
the social support network exerts an influence on the
amount of depressive symptomatology that differs for
initiators and noninitiators. From this vantage
point, the differences between initiators and

noninitiators are striking: as the social support
network becomes increasingly based on familial
relationships, its ability to impact on adjustment
becomes increasingly dependent upon who caused the
separation (see Figure 1). When the separation was
initiated by the subject, a highly familial, stability-
oriented network appears unable to provide the support
needed to diminish depressive symptomatology as
compared to a highly nonfamilial, flexible network.
Conversely, when the subject was not the initiator of
the separation, a highly familial, stability-oriented
network appears more suited toward meeting the needs
of the subject.

The proportion of family members in the social
support network presents as a more salient issue for
noninitiators. Negative correlations between the
proportion of family members and depression were
consistently larger than the relative positive
correlations for initiators. Further, all
correlations for noninitiators reached significance at
p <.02 or better; while several correlations for
initiators approached significance at p <.05, none
reached significance. The differential size in these
correlations may also be related to issues that only
the noninitiator experiences. Beyond the anger, loss,
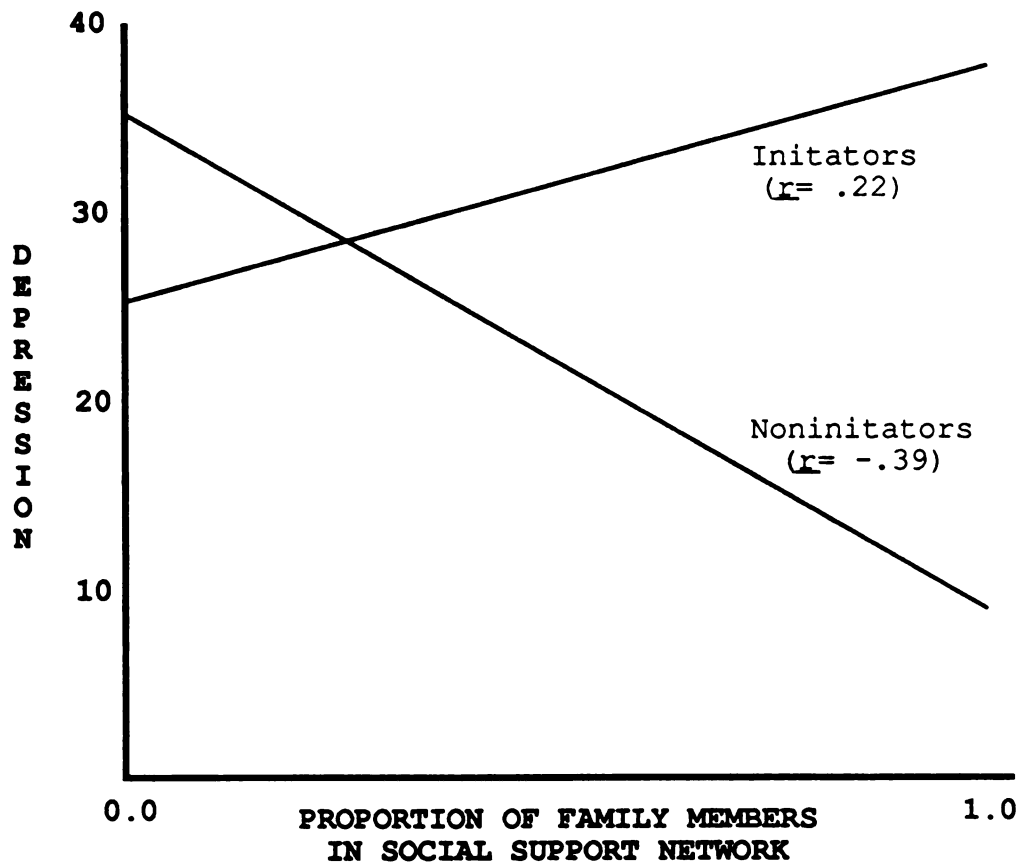
Note: Depression measured by CES-D at time
       of interview.

Figure 1

Regression Lines for Depression as an Interaction of
Initiator Status and Proportion of Family Members in
the Social Support Network.

and failure both members feel upon separation, noninitiators may also have concurrent blows to their self-esteem and questions about their desirability which make them either more in need of support or more responsive to the support they do receive. From this, it follows that noninitiators appear have greater need for stability in their social support network than initiators have need for acceptance of change.

Another possibility is that a lowered self-esteem may prevent a person from activating the social network for assistance. One recent study of the correlates of social support receipt (Dunkel-Schetter, Folkman, & Lazarus, 1987) indicates that the manner in which "an individual copes in a particular stressful encounter may provide cues to members of his or her social network regarding the person's needs and desire for support" (p. 78). It follows that the manner in which the noninitiator copes with the loss of esteem at separation may also be related to his or her ability to communicate needs effectively with the social network. If the noninitiator does experience a blow to self-esteem which interferes with the ability to communicate needs to the social support network, a family based network may be more attuned to the unstated needs of the noninitiator.

An effect of time is apparent. The simple correlation between length of separation and depression, without consideration of initiator status, is r = .05 (p = .357). Controlling the length of separation (which for the sample as a whole averaged approximately 10.2 months) did not strengthen the correlations between the family proportion and depressive symptomatology, yet increases in correlations were seen when controlling the time period from the onset of difficulties to the separation (which averaged 51.0 months) and from the onset of difficulties to the time of interview (which averaged 62.4 months). This highlights that the severity of depressive symptomatology is determined by factors other than the separation itself, and that this depression can be pervasive over at least the first year of the separation.

Changes over time in the relationship between the family proportions and depression may reflect changes in the amount of support provided by family members as they themselves adjust to the separation, or more likely, may reflect changes in who the subject chooses to include in the social support network. Of the 56 subjects, 36 (64.2%) reported including at least one new person in the social support network in the past

two years, roughly covering the period from one year
prior to the separation until the interview; 19
(33.9%) subjects reported including 3 or more new
people in the social support network. Subjects who
have included at least one new member tend to have a
large portion of the social network comprised of new
members; an average of 31.8% of the social support
network of those including new members was comprised
of persons known less than 2 years. Newer members of
the social support network appear to be capable of
providing the same amount of support as older members
of the social network. The emotional support provided
by new members were rated by the subjects using a
Likert scale of 1 to 5 (where 1 is "None At All" and 5
is "A Great Deal") and averaged 3.67; practical
support provided averaged 1.62 on the same scale, and
informational support provided averaged 3.20. In
comparison, the proportion of the social support
network known longer than 2 years was rated on
emotional support provided as 3.61, practical support
provided as 1.77 and informational support provided as
3.04. All comparisons between new and old members of
the social support network were nonsignificant at
p <.05.

Of members of the support network known less than 2 years, both initiators and noninitiators most commonly included married people as friends (40.0% and 49.2% of the new members, respectively). However, initiators included more separated and divorced people among new members of their social support network than noninitiators (41.8% and 27.0%, respectively). It appears that for initiators new members are included in the social support network (and perhaps sought out) due to their ability to provide understanding as well as acceptance and support.

The Process of Social Support

Structural aspects of the social support network, as seen in Figure 1, are clearly related to adjustment following marital disruption. An understanding of the functional aspects of the high and low family proportional structures, while speculative within this study, is appropriate. On the basis of these results, it is suggested that support from the social support network (whether friend-based for initiators or family-based for noninitiators) is provided by a positive role identity and greater social integration; further, that high and low family proportions are functionally able to be more supportive to noninitiators and

initiators, respectively. Role identity may be
achieved simply by the increased presence of family
(for noninitiators) or friends (for initiators) in
the social support network. However, social
integration hinges upon acceptance. As Spanier and
Hanson (1982) have suggested, family members of
individuals experiencing marital separation may be
reactive only, with their ability to provide support
tied to their perceptions of the separation.. A
network that is unable to be supportive may instead
provide undesired opinions, evaluations, and
criticisms, such as those described by Walker et al.
(1977). Similar types of negative social interactions
appear to have more impact upon the adjustment of
individuals than positive social interactions (Rook,
1984); these social interactions may be one component
of the overall communication of acceptance.

Initiators and noninitiators may require different
types of support to feel accepted: an initiator needs
support for the new social role being undertaken and a
noninitiator needs support in seeking stability and
identity. However, networks with high and low
proportions of family members may be accepting of
different things. Hirsch (1981) has suggested that
less dense networks provide greater access to

alternative social roles, while a more dense network provides support for stability and a maintenance of relationships. Thus, the social support network of an initiator which is both dense and encouraging of stability and a maintenance of the status quo (i.e., a network with a high proportion of family members) may be unable to provide a sense of acceptance of the separation and disruption of relationships. Conversely, the social support network of a noninitiator which is not dense and encourages a widening of social roles (i.e., a network with a low proportion of family members) may be unable to provide stability or acceptance of the desire for stability and thus may cause an increased sense of isolation and an increased amount of depressive symptomatology. If the noninitiator's coping pattern for the loss of self-esteem prevents the communication of need to the social support network, the experience of isolation may be heightened. This process places emphasis on the absence of acceptance by the social support network as a direct contributor to increased depression, by decreasing feelings of personal value and self-esteem, a model influenced by the thought of Cohen (1988) and Rook (1984).

Cohen (1988) has discussed several views of the process relating social support to physical health, one of which he specifically labels an "identity and self-esteem" model. In viewing of the link between support and physical health, he notes "it is isolation that causes disease rather than social integration which causes health. This approach assumes that isolation increases negative affect and sense of alienation and decreases sense of control" (Cohen, 1988; p. 281). This description of a physical process is similar to the social process viewed by Rook (1984), who found that negative social interactions have a greater detrimental impact on adjustment than positive interactions have a facilitative impact. A more recent study (Pagel, Erdly, & Becker, 1987) of the social networks of people who are the primary caregiver to a spouse with Alzheimer's Disease also indicated that negative aspects of the social network have a greater impact upon a person than helpful aspects. Pagel et al. asked these caregivers to rate how helpful as well as how upsetting each member of their social network was along 5 categories of support (cognitive guidance, self-disclosure, socializing, emotional support, and tangible aid). Their analyses found that while upsetting aspects of the social

network were consistently related to levels of depression, helpful aspects were not.

Further examination of the subject interviews of this study helps clarify an understanding of familial and nonfamilial emotional support. Initiators and noninitators did not differ in the level of emotional support received by family members. In a simple viewing of responses to a 5-point Likert scale, with 1 representing "None At All" and 5 representing "A Great Deal", the amount of emotional support received from family members of initiators averaged 3.72 while the emotional support received from family members of noninitiators averaged 3.57; these differences were nonsignificant (p = .567). Initiators and noninitiators also did not significantly differ in the amount of practical support or informational support, measured on the same scale. However, viewing the relative standing between the amount of familial and nonfamilial emotional support within each initiator status lends support to the hypothesis that families are more supportive of noninitiators and friends are more supportive of initiators, at least for noninitiators. (Upon initial analyses, all of the following procedures comparing familial and nonfamilial support were nonsignificant. When the

spouse was removed, if present, from computations involving familial support, the following significant differences were found). For noninitiators, familial emotional support provided was rated as 4.12 while nonfamilial emotional support provided was rated as 3.61, a significant difference (p = .048); practical assistance provided was rated as 2.59 for familial social network members and 1.64 for nonfamilial social network members, also a significant difference (p = .001). No significant differences in emotional, practical or informational support provided were found to be significant for initiators, although nonfamilial members were rated as providing more emotional support than family members.

It may be that the changes in the level of support are more important than the relative standing of levels of support; this study can not determine whether family support has remained constant or increased relative to nonfamilial support following marital separation. However, based on the above findings, it is possible that noninitiators with a high proportion of family members may have a network which is more supportive (both as a whole and individually) relative to noninitiators with a low proportion of family members. This could account for

the statistical significance of the network-depression correlations for noninitiators.

As with the correlations between proportion of family members in the social support network and depression, the differences in support received from family and friends may be a slightly more salient issue for noninitiators. The amount of emotional and practical support that noninitiators receive from family members relative to nonfamilial members may be the key issue in determining the levels of depression experienced after marital separation. However, by the nature of this study, no measure of family support prior to separation could be taken; it can not be determined if there has been a movement in either direction of the amount of emotional, practical, or informational support given by family members.

Problem Solving Skills as an Alternative Process

An alternative explanation could be suggested by findings which indicate that strong social problem solving skills are related to reduced depression in the presence of negative life events (Gotlib & Asarnow, 1979; Nezu & Ronan, 1988). Problem solving skills have been found to moderate the relationship between stress and depression in college students.

It has been hypothesized that individuals with
effective social problem solving skills are better
equipped to cope with negative life events and are
thus less susceptible to stress-related depression
(Nezu, Nezu, Saraydarian, Kalmar, & Ronan, 1986). It
has also been suggested that depressed individuals do
not lack general problem solving skills but only those
specific to interpersonal functioning.

Clearly, parallels between attempts at problem
solving and initiator status may be drawn. A marriage
that is nearing dissolution requires action based on a
clarity of thought and emotion, skills which also
enhance problem solving attempts. Strong problem
solving skills will also assist in meeting the
difficulties separation present outside of the
decision to terminate a marriage, such as housing and
financial arrangements. Ultimately, however, whether
viewed as a representation of perceived control or
attempts at problem solving, the data do not reveal
significant differences in depression between
initiators and noninitiators based on initiator status
alone. This may be interpreted that problem solving
attempts have been unsuccessful for all individuals
undertaking a separation regardless of initiator
status, or that the ability to solve problems does not

impact upon depression following marital separation.
One difficulty with this view is that, if initiator
status is viewed as a proxy for problem solving
skills, the interaction between problem solving skills
and the proportion of family members in the social
support network becomes difficult to interpret.

Attempting to relate problem solving skills to
initiator status should not be quickly rejected,
however; research may relate problem solving skills to
initiator status in a manner not fully clear as of
yet. It may be useful to keep in mind that the
correlations between life events and depression are
moderate (Thoits, 1982); there is room for both social
support and problem solving skills to independently
moderate the relationship between life stress and
depression. However, this study provides no support
for differences in depression based on initiator
status whether viewed as a measure of control, of
problem solving skills, or the simple desire to
terminate the marriage.

Implications and Applications

Liebermann (1986) feels functional studies of
social support have led to confusion in
conceptualizations of social support. Clearly,

examination of structural aspects of the social support network can yield information both of interest and utility, particularly if examined deeper than the level of superficial relationships. Further, this information may allow more global statements about social support networks to be made than situationally specific functional studies.

Rook and Dooley (1985) have discussed the difficulty inherent in translating the multivariate, conditional social support research into a simple framework for interventions. They note that interventions typically attempt either to modify the social environment to be more supportive or to modify the individualistic manner in which support is elicited and evaluated; the common argument for closer ties between the research and the application in future studies is made. While the bulk of social support research may be difficult to translate to public policy (see Rook & Dooley, 1985, for discussion), several suggestions may be made based on this study.

Both initiator status and the social support network are clear factors in the adjustment to marital separation. Since initiator status in of itself does not appear to influence depression, attempts at

facilitating adjustment should focus on aspects of the social support network. Brownell and Shumaker (1985), in reviewing policy implications of social support research, note the argument that efforts to change the social network are easier than attempts to change stressful environments. However, they argue that attempts to manipulate the social support networks will fail with those who view themselves as "individualists" or with those who do not take advantage of the opportunities presented by a supportive network. Further, successful attempts at providing a supportive network may still be overshadowed by an environment that offers greater encouragement of unhealthy coping patterns. While it is true that the most supportive network is of little benefit unless utilized, steps may still be taken to provide a supportive environment. The proliferation of support groups in recent years is one example of supportive networks that are in place for a person who wishes to use them.

A total prevention of depression following separation does not appear possible. This study further highlights that couples approaching separation should anticipate some depressive symptomatology during the dissolution, regardless of initiator status

or structural aspects of the social support network.
The emotional and physical responses following marital
separation are real, difficult, and well documented.
As of yet, no particular subpopulation seems immune to
these responses.

Within this framework, it does appear possible to
impact upon the extent of depressive symptomatology
that individuals experience. Given that the
separation will bring physical and emotional distress,
attempts to diminish symptomatology should be
encouraged. One clear action that might be suggested
to individuals would be to maintain contact with both
the familial and nonfamilial aspects of the social
support network so that it can be utilized should a
separation occur. A reciprocative relationship with
supporters should be encouraged (Brownell & Shumaker,
1985). Individuals undergoing marital separation
would be well served to organize their social support
network to meet their needs depending on initiator
status, with initiators to seek acceptance within a
nonfamily-oriented network and noninitiators to seek
stability by turning to family members.

Health care professionals working with an
individual who is in the process of separating might

emphasize identity and integration issues, and encourage participation in social activities not only for their commonly known ameliorative effect on depression but for the opportunity to introduce useful individuals into the social support network.

Limitations of Study and Future Research

Like much research, this study answers some questions while raising others. Thus, there are limitations on the interpretation of these results. Any correlational study can not prove causality, nor can assumptions about the direction of the relationship be made. Statistically, it is conceivable that depression may affect the desire of subjects to maintain family members in their social support network, and that initiator status differentially affects this desire as well. A longitudinal study including a path analysis of the initiator status, proportion of family members, and depression sequence could shed some light on the appropriateness of either viewpoint. Within the models suggested by the previous literature on social support, however, these data appear to support the hypothesis that the structure of the social support network is impacting upon depression.

An additional limitation is the likelihood that forces other than initiator status and the structure of the social support network are influencing adjustment. The longer the period between the onset of difficulties (when the process of adjusting would need to begin) and the interview, the longer the period these forces will have had to exert an effect, as the correlations controlling for this period show. In conjuction with unmeasured forces toward adjustment are likely to be unassessed contributors to depression. Beyond the loss of marriage, and in some cases custody of children, it is not clear what personal losses the subjects may have experienced that could influence the amount of depression measured. It might be expected that these forces would balance each other over the sample, but since this cannot accurately be determined it remains specualtion. Thus, a more refined attempt to control premorbid levels of depression and the impact of subsequent events would increase the utility of the findings presented here.

A final criticism is the cross-sectional design of this study. Due of the nature of research into marital separation, it is very difficult to obtain measures of premorbid levels of social support or

depression. Conclusive interpretation must be restrained until a longitudinal study can be undertaken, similar to that proposed by Gottlieb (1983). Such a longitudinal study could monitor not only the pre- and post-separation levels of the independent variables but the assess the coping process as a whole, the mobilization of social support, the source and levels of emotional support provided, and the effectiveness of community-based prevention programs. A longitudinal design would also allow an assessment of the relationship of problem solving skills to initiator status and depression following separation. Unfortunately, identifying and following couples at risk for marital separation is a difficult; it may be that research in this area must remain cross-sectional.

Initiator Status, Family Members, and Depression

When viewing marital separation, there is no simple discription of the relationship between social support and adjustment. Initiator status and the proportion of family members in the social support network interact to impact on depression, with a nonfamilial social support network diminishing depression for initiators as compared to

noninitiators, and a familial social support network diminishing depression for noninitiators as compared to initiators. It appears that a social support network which diminishes depression has more impact upon noninitiators, who may be dealing with personal issues as well as the loss of the marriage. The process by which social support facilitates adjustment is hypothesized to be one involving social integration, or more precisely, an isolation which is caused by the lack of role identity and social integration which is itself caused by a nonsupportive social support network. During the transition from marriage to separation, isolation appears to be a more detrimental experience than acceptance is a healing experience. To decrease the liklihood of isolation and increase the liklihood of understanding and acceptance, a person in the process of terminating a marriage would be well served to seek out, organize, and utilize their social support network according to their role in the separation: a familial support network to provide stability for noninitiators and a nonfamilial support network to provide acceptance for initiators. The results of such an effort should be a diminished potential for depression following the separation with both initiators and noninitiators.

APPENDICES

Appendix A

Coding Discrepancies

This study used data drawn from a larger study on intergenerational effects of marital disruption, the adult portion of which interviewed a total of 65 subjects. During the interview, answers to questions were recorded by hand, then later scored independently by two coders to ensure accuracy. A third independent judge compared the two scorings for reliability, and resolved any discrepancies between scorers. Discrepancies were considered to be any difference in scoring by the two coders. The third coder had primary responsibility for locating the reason for the discrepancy and providing a resolution based on the scoring criteria. In cases where a resolution was not clear, the discrepancy was brought to the attention of the research group as a whole. The statistics presented below refer to the entire sample of 65 cases.

Thirteen questions from the interview portion of data collection would be considered "open-ended", requiring interpretation prior to scoring by the coders (e.g., "what advice would you have for a friend

considering marriage?"). Of these 13 questions, 9
were scored for each of two unique responses, thus
raising the total number of questions coded to 22. Of
these 22 codings, 3 questions required selecting one
of 2 possible categories, 3 questions required
selecting one of 3 possible categories, 4 questions
required selecting one of 4 possible categories, 1
question required selecting one of 5 possible
categories, 1 question required selecting one of 6
possible categories, 8 questions required selecting
one of 7 possible categories, and 2 questions required
selecting one of 8 possible categories.

Of the 1,430 open-ended codings required over 65
subjects, there were 159 scoring discrepancies, an
intercoder accuracy rate of 88.8%. When considering
all 7,410 potential codings (total possible coding
categories times 65 cases), this accuracy rate rises
to 97.8%. No corrections for base rate were computed.

Discrepancies could be classified into 3
categories: incomplete codings/over codings,
disagreement between coders, and errors. As noted,
some open-ended questions required coding each of
several unique responses given by the subject;
incomplete codings/over coding discrepancies refer to
subject's multiple responses being incorrectly

included or omitted. Disagreement between coders refers to codings in which coders categorized the subject's response differently. Errors refer to clear clerical errors. Of the 159 scoring discrepancies, 53 were determined to be incomplete codings/over codings (33%), 88 were determined to be disagreements in criteria used (55%), and 18 were determined to be clerical errors (11%).

The majority of the questions during the interview would be considered "closed-ended", requiring only the direct scoring of subject response (e.g., age, sex, income). As with open-ended questions, each item from the interview was scored and categorized independently by two data coders, using previously determined criteria. These codings were reviewed by an independent third coder who again noted all discrepancies, resolved them (if possible) using the scoring criteria, and brought those that could not be easily resolved to the attention of the group.

Scoring interviews of subjects required the coding of 359 close-ended responses, a total of 23,335 codings for the total sample of 65 subjects. Of the 359 close-ended questions, 272 had prior categories established with which to match subjects responses; the balance of questions required no categories (e.g.,

how many people live with you, number of children).
Of these 272 questions with prior coding categories,
12% offered 2 categories, 7% offered 3 categories, 8%
offered 4 categories, 46% offered 5 categories, 11%
offered 6 categories, 5% offered 7 categories, 2%
offered 8 categories, and 9% offered 10 categories.

Discrepancies could be classified into 3
categories: classification difficulties, miscoding of
data, and errors. Classification difficulties were
considered to be discrepancies in determining which
category an interview answer best fit (such as
occupational status or religious affiliation),
difficulties in interpreting the meaning of the answer
given in the interview, and the like. In some cases,
the two initial coders attempted to code the data and
disagreed; in other cases they indicated their
difficulty without attempting to code the data.
Miscodings, however, were considered to be cases where
the subject response was assigned to the wrong
category by at least one coder, based on the initial
criteria. Errors, finally, were considered to be
discrepancies that were clearly clerical in nature.

There were 336 scoring coder discrepancies on the
close-ended portion of the interview; this is an
accuracy rate of 98.6%. Of the 1.4% discrepencies,

32% were determined to be classification difficulties,
50% were determined to be miscodings, and 18% were
determined to be clerical errors. Of the
classification difficulties, 18% were due to multiple
responses by the subject where only one response was
anticipated. As this became apparent during the
coding process, provisions were made on certain
variables to allow the coding of multiple responses,
and these responses were rescored.

Appendix B

Interview Form

This study used data from a larger study on intergenerational effects of marital disruption, which collected much more data than was used in the course of this thesis. For the intergenerational study, two interview forms were developed: one for those persons who have already separated and those who are in marital distress but have not yet separated. These forms were congruent in most aspects. The results reported in this thesis were drawn only from data on separated persons.

Interview Form For Persons Already Separated

Interview #:_____
Sex: _____Male _____Female
Interviewer:_____
Date of Interview:_____

Name of Person You
Are Interviewing:_____

Hello, my name is _____ and I am from
Michigan State University. As you know from our
letter, we are asking people how they feel about the
change which marital separation produces in their
lives. Your answers will be kept confidential. The
only way anyone will know about your being part of
this study will be if you tell them yourself about
your participation. Your answers will be combined
with those of other people in the Ingham County area

so that we can make statements about groups of people and not about individuals. Before I ask you any questions please read this consent form. I'll answer any questions you have to the best of my ability.

(After person signs)

First, I'll need to ask you some general questions about your family, your education, and income.

(Check to see if following information is same as telephone screening)

1. What is your age? _____

2. How many children do you have? _____

3. Where do they live?
    _____ with me
    _____ with spouse
    _____ other

4. How many people live here with you? _____

5. Are you parents alive?
    Mother _____yes _____no
    Father _____yes _____no

(If at least one parent is alive): As you may recall part of our study involves how your family, including your parents and in-laws, react and adjust to your marital separation. We would like to contact them by mail and ask them to fill out an anonymous and confidential questionnaire that asks about their reactions and adjustment to your separation, IF THEY WISH.

For this part of the study, we need to know your parents' and in-laws' addresses and phone numbers. The phone numbers will only be used after they have consented to participate by mail. **(Obtain information on step-parents/step-in-laws only if subjects feel as if these persons were "parents" to them.)**

Parent's Name: _____

Address: _____

_____

Phone: _____

In-law's Name: _____

Address: _____

_____

Phone: _____

6. What is the last year in school that you completed? _____
   12 = High School Graduate
   16 = College Graduate, etc.

6a. Spouse education _____

7. Are you presently employed?
   _____Yes, full-time (35+ hrs/week)
   _____Yes, part-time (<35 hrs/week)
   _____No

7b. Spouse occupation _____

8. If employed, what do you do? _____

9. What is your approximate monthly income now? _____

10. Has your income changed since your separation?
    _____No
    _____Yes, worsened
    _____Yes, improved

11. Is this your first separation from your spouse?
    _____Yes, first
    _____No, there have been others

12. When (Date) did you separate? _____

13. Thinking back, would you say that this separation was:

_____completely your decision
_____mostly your decision
_____it was a mutual decision
_____mostly your spouse's decision

14. Did you or your spouse ever file for divorce before?

_____no   **respondent**
_____yes

_____no   **spouse**
_____yes

15. (If yes) What led you (him/her) to change your (his/her) mind? _____

_____

16. Since you have separated, have you tried reconciling?

_____no
_____yes

17. (If yes) When was that? (Specify date)

_____

18. What happened? _____

_____

19. Have you seen an attorney in the past six months regarding your marriage?

_____yes
_____no

20. Are you planning to meet with an attorney in the next month?

_____yes
_____no

Now I would like you to think about your marriage and why you separated. (Give "Precipitating Events Card") Please rate these issues in terms of how much they contributed to the decision to separate. Use the rating form at the top of the page for your answers. (INTERVIEWER: Fill out the OPSCAN as interviewee tells you ratings)

21. It's hard, I know, to pinpoint this, but when would you say things started to go bad in your marriage? _____

_____

Some people report that their separation involves a lot of conflict and others say that their separation is friendly. From your point of view, do you feel there is a lot of conflict in your separation or is it friendly? On a scale of 1 to 5, where 1 is a lot of conflict, and 5 is friendly, how would you rate your separation?

22.   (Circle)
  A lot of conflict   Friendly
        1   2   3   4   5

Here is a list of things you might have done when you had a conflict or disagreement with your spouse (Hand "Conflicts Card") within the LAST YEAR. Using the scale at the top, please tell me how often YOU did these.
(Read each item to interviewee)
        0 = never
        1 = once that year
        2 = two or three times
        3 = often, but less than once a month
        4 = about once a month
        5 = more than once a month
(Indicate number from scale)

23. _____I tried to discuss the issue relatively calmly

24. _____Did discuss the issue relatively calmly

25. _____Got information to back up my side of things

26. _____Brought in someone to help settle things (or tried to)

27. _____Argued heatedly but short of yelling

28. _____Yelled and/or insulted

29. _____Sulked and/or refused to talk about it

30. _____Stomped out of the room

31. _____Threw something (but not at my spouse) or smashed something

32. _____Threatened to hit or throw something at my
spouse

33. _____Threw something at my spouse

34. _____Pushed, grabbed or shoved my spouse

35. _____Hit (or tried to hit) my spouse, but not with
anything

36. _____Hit (or tried to hit) my spouse, with
something hard

Now I would like to know if there have been any changes
in the way you spend your spare time since your
separation. For the following activities, please tell
me if you:
    1 = spend LESS time doing this now
    2 = spend ABOUT THE SAME amount of time doing
        this now, or
    3 = spend MORE time doing this now

37. _____Involvement in entertainment activities (such
as going to the movies, sporting events,
dancing, concerts, plays, etc.)

38. _____Involvement with others (such as visiting
with friends or relatives, attending
meetings, school, work, etc.)

39. _____Involvement with hobbies (such as watching
TV, reading, going for drives in car, playing
cards/games, traveling, vacations,
art/handiworks, music, etc.)

40. _____Other involvements, please indicate:

41. Have you been closely involved with a person of
the opposite sex other than your spouse?
    _____no
    _____yes, starting before the separation
    _____yes, starting after the separation

42. **As far as you know, has your spouse been involved with a person of the opposite sex other than you?**
_____no
_____yes, starting before the separation
_____yes, starting after the separation

(If there are children under 18 living with interviewee, continue with next questions. If there are children, but not residing with interviewee, go to question 48. If there are no children, go to question 49)

43. **(If separated and children under 18)** You mentioned that the children are living with you (your husband/wife). Is this arrangement agreeable to both you and your husband/wife?
_____yes, mutually agreeable
_____only to respondent
_____only to spouse
_____to neither

44. **Why is that?** _____
_____

45. **Are the living arrangements agreeable to the children?**
_____yes, to all the children
_____yes, to some of the children (specify which one's are satisfied)
_____no, to none of the children

46. **What arrangements have been made for visits between you (your husband/wife) and the children? (Specify frequency of visits)**
_____
_____

47. **(If any visits)** Are the visiting arrangements agreeable to you?
_____yes   _____no
(If no) Why not? _____
_____

47a. **Who decided the living arrangements for your children?**
_____you
_____you & spouse
_____spouse
_____third party

47b. Who decided the visiting arrangements for your
     children?
     _____you
     _____you & spouse
     _____spouse
     _____third party

(For all respondents with children, any age)

48. Do you see any changes in the children which you
    think are related to the separation? What did
    they say or do? **(Probe for each child: How
    about _____?)**
    Child: _____
    _____
    Child: _____
    _____
    Child: _____
    _____

49. Do you see any changes in your parents which you
    think are related to the separation?
    _____no
    _____yes **(explain)** _____
    _____

50. Do you see any changes in your in-laws which you
    think are related to the separation?
    _____no
    _____yes **(explain)** _____
    _____

Now I have another card for you to look at. **(Hand "My
Feelings Toward My Spouse Card")**. Please read these
statements over and tell me the number of the statement
which best describes your feelings toward your spouse
now.

51. _____(Statement #)

Now turn the card over and tell me which statement best
describes what you believe are your spouse's feelings
toward you now.

52. _____(Statement #)

Finally, I have just a few more questions for you.

53. Knowing what you know now, if you could live your life again, would you marry the same person, a different person, or not marry at all?
    _____same person
    _____different person
    _____not marry at all

54. Why is that? _____
    _____

55. If a close friend came to you for advice about getting married, what have you learned from your experience that would be helpful to this person? (Probe: What would you tell him or her?) _____
    _____

56. Some of the changes separation requires are pleasant and some are unpleasant. What have been some of the pleasant changes? _____
    _____

57. And what have been some of the unpleasant changes? _____
    _____

58. Thinking over your experiences, are there any kinds of special programs or assistance which would have made things easier for you when you first separated? _____
    _____

59. In terms of the future, what kinds of help or assistance do you think would aid you? _____
    _____

END OF INTERVIEW

Social Support Questionnaire

Please list each significant person in your life on the right. Consider all the persons who provide support for you or who are important to you.

Use only first names or initials, and then indicate the relationship as in the following example:

Example:

	First Name or Initials	Relationship
1.	Mary	Friend
2.		
3.		
4.		
5.		

Use the following list to help you think of the people important to you, and list as many people as apply in your case.

-spouse or partner
-family members or relatives
-inlaws
-friends
-work or school associates
-neighbors
-health care providers
-counselor or therapist
-clergy
-other

You do not have to use all 20 spaces. Use as many spaces as you have important persons in your life.

	First Name or Initials	**Relationship**
1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____
5.	_____	_____
6.	_____	_____
7.	_____	_____
8.	_____	_____
9.	_____	_____
10.	_____	_____
11.	_____	_____
12.	_____	_____
13.	_____	_____
14.	_____	_____
15.	_____	_____
16.	_____	_____
17.	_____	_____
18.	_____	_____
19.	_____	_____
20.	_____	_____

For each person you listed, please answer the following questions by writing in the number that applies.

Question 1: How much Emotional Support do you receive from this person?

Question 2: How much Advice and Information do you receive from this person?

1=none at all   2=a little   3=some
        4=quite a bit   5=a great deal

1. _____   _____

2. _____   _____

3. _____   _____

4. _____   _____

5. _____   _____

6. _____   _____

7. _____   _____

8. _____   _____

9. _____   _____

10. _____   _____

11. _____   _____

12. _____   _____

13. _____   _____

14. _____   _____

15. _____   _____

16. _____   _____

17. _____   _____

18. _____   _____

19. _____   _____

20. _____   _____

Question 3: How much Practical Assistance (money, food, housing, etc.) do you receive from this person?

Question 4: To what extent do you talk this person about your separation or marital discord?

1=none at all   2=a little   3=some
4=quite a bit   5=a great deal

1. _____   _____

2. _____   _____

3. _____   _____

4. _____   _____

5. _____   _____

6. _____   _____

7. _____   _____

8. _____   _____

9. _____   _____

10. _____   _____

11. _____   _____

12. _____   _____

13. _____   _____

14. _____   _____

15. _____   _____

16. _____   _____

17. _____   _____

18. _____   _____

19. _____   _____

20. _____   _____

Question 5: What is the current marital status of this person?

1=never married
2=married
3=married but separated
4=divorced
5=widowed

Question 6: How long have you know this person?

1=less than 6 months
2=6 to 12 months
3=1 to 2 years
4=3 to 5 years
5=more than 5 years

1. _____   _____

2. _____   _____

3. _____   _____

4. _____   _____

5. _____   _____

6. _____   _____

7. _____   _____

8. _____   _____

9. _____   _____

10. _____   _____

11. _____   _____

12. _____   _____

13. _____   _____

14. _____   _____

15. _____   _____

16. _____   _____

17. _____   _____

18. _____   _____

19. _____   _____

20. _____   _____

Question 7: To what degree is this person also in your spouse's social support network?

1=not in spouse's
2=a bit in spouse's
3=1/2 spouse's, 1/2 mine
4=more in spouse's

Question 8: Have there been changes in frequency of your contact in last 6 months?
1=signfcnt decrease
2=slight decrease
3=no change
4=slight increase
5=signfcnt increase

1. _____   _____
2. _____   _____
3. _____   _____
4. _____   _____
5. _____   _____
6. _____   _____
7. _____   _____
8. _____   _____
9. _____   _____
10. _____   _____
11. _____   _____
12. _____   _____
13. _____   _____
14. _____   _____
15. _____   _____
16. _____   _____
17. _____   _____
18. _____   _____
19. _____   _____
20. _____   _____

Appendix D

The Center For Epidemiological
Studies-Depression Scale

Scoring: ___0___   ___1___   ___2___   ___3___
  Code: Rarely   Some   Moderately   All The Time

Instructions: Using the answer key above, select the response that best describes how you feel about each question and fill in the corresponding circle to the right of the question.

a.   I am bothered by things that usually don't bother me

b.   I do not feel like eating; my appetite is poor

c.   I feel that I could not shake off the blues with help from family or friends

d.   I feel that I am just as good as other people

e.   I have trouble keeping my mind on what I am doing

f.   I feel depressed

g.   I feel that everything I do is an effort

h.   I feel hopeful about the future

i.   I think my life has been a failure

j.   I feel tearful

k.   My sleep is restless

l.   I am happy

m.   I talk less than usual

n.   I feel lonely

o.   People are unfriendly

p.   I enjoy life

q.   I have crying spells

r.   I feel sad

s.   I feel that people dislike me

t.   I can not "get going"

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