

“Honey I’m Pregnant!”

Planned, unexpected and unwanted transitions to parenthood

A Senior Honors Thesis

by

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Submitted to the Office of Honors Programs

Texas A&M University

In partial fulfillment of the requirements of the

UNIVERSITY UNDERGRADUATE  
RESEARCH FELLOWS

April 2008

Major: Psychology

## ABSTRACT

“Honey I’m Pregnant!” Planned, unexpected, and unwanted transitions to parenthood  
(April 2008)

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Previous studies have shown that for many couples, the transition to parenthood is accompanied by a marked decline in relationship satisfaction and individual functioning. However, there is substantial variability in couples’ reactions to the birth of their first baby, with some couples even showing improvements in relationship and individual functioning. Previous research demonstrates that two important risk factors for declines in relationship satisfaction after the birth of the couple’s first child are whether the pregnancy was planned and whether the couple would like to be having a child at this time. Other studies have shown that individual risk factors (e.g., depression) and other relationship predictors (e.g., not being married) can also lead to measurable

declines for couples after the transition to parenthood. However, despite the seeming overlap of these risk factors with pregnancy characteristics, previous research has not examined whether having an unplanned/undesired pregnancy is independent of the other individual and relationship risk factors. Therefore, the present study examines whether there is a relation between the type of pregnancy and the individual and relationship risk factors examined in previous literature.

Participants included 175 heterosexual couples along with 18 women and 5 men whose partners did not participate. As part of a larger study offering interventions to first-time parents, couples responded to flyers, community boards, and pamphlets placed in doctors' offices as well as announcements made in childbirth classes. Participants who contacted the study were asked a series of questions over the phone to gather more information about the individual, their relationship, and their pregnancy to see if they were eligible for this larger study; the present study utilizes this data collected over the phone. One-way ANOVAs and Chi Squares were used to analyze the data.

The present study will determine whether having an unplanned or undesired pregnancy can be assumed to be a risk factor for subsequent relationship deterioration in its own right or whether it may be confounded with other individual and relationship risk factors. If it is indeed an independent risk factor, interventions could be targeted at this at-risk group. On the other hand, if unplanned and undesired pregnancies are found to be strongly related to other individual and relationship risk factors, then already-developed interventions may be effective in preventing subsequent relationship distress.

## DEDICATION

To my parents, brother, niece, and fiancé who have supported me in everyway throughout this endeavor, I could not have done it without them.

## ACKNOWLEDGEMENTS

First I would like to extend my deepest gratification to Dr. Doss. The time and efforts that he put into the paper made this possible. His guidance, advice, and mentorship has contributed to my understanding and knowledge of the psychology field. Without his brilliant wisdom this project would never be possible. Working with Dr. Doss on this thesis and his lab has been an incredibly enriching part of my undergraduate career.

Secondly, I would like to thank Kathryn Carhart who played a vital role in the construction and perfection of the writing process. Her helpful suggestions, thought – provoking comments, and critiques have not only contributed to improvements of the paper, but my knowledge of writing a thesis.

Also, I am appreciative for the help provided by Annie Hseuh, Vanessa Coca, and Anne Wood. I am so grateful for the assistance and enjoyment they contributed to the project.

Lastly, I would like to thank the Texas A&M University Honors Programs Office for this opportunity and the funding they provided that help made this project possible.

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## I INTRODUCTION<sup>1</sup>

While having children promotes marital stability by reducing the likelihood of divorce or separation (Heaton, 1990; Lillard & Waite, 1993; Tzeng, 1992; White, Booth, & Edwards, 1986; Waite & Lillard, 1991), the birth of the first child has been linked to a statistically significant decline of relationship satisfaction and functioning (Belsky, Spanier & Rovine, 1983; Kurdek, 1999; Cowan & Cowan, 2000; Lawrence, Rothman, Cobb, Rothman, & Bradbury, 2008). Furthermore, the transition to parenthood places stress on new parents' individual functioning which can in turn negatively impact the quality of the couple's relationship, parent-child relationship, and their infant's development (Cowan & Cowan, 1995). Additionally, since many first-time parents romanticize the notion of what being a mother or father entails, they are often unprepared for the challenges that come with being a parent. This lack of preparedness can contribute to the subsequent decline in relationship satisfaction (LaRossa & LaRossa, 1981).

In turn, a decline in the couple's functioning and relationship satisfaction affects their child's development (Cowan & Cowan, 1995; Heinicke, 1995; Glade, Bean, & Vira, 2005; Sarrazin, 2007; Fonagy, Steele, & Steele, 1991). A couple's relationship strongly influences their quality of parenting and their child's development of social relationships (Cowan, Cowan, Schulz, & Heming, 1994; Glade et al.). Consequently parental conflicts can threaten a child's subsequent cognitive, social, and emotional

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<sup>1</sup> This thesis follows the style and format of *Journal of Family Psychology*.



development (Gable, Belsky, & Crnic, 1992; Goodman & Gotlib, 1999) and threaten the parent-child relationship (Owen & Cox, 1997). Likewise, maternal depression has been shown to have adverse affects on the functioning and development of children (Sarrazin), placing them at a greater risk for developing their own psychopathology (Goodman & Gotlib, 2002).

While couple functioning and relationship satisfaction have been consistently shown to decline across the transition to parenthood for the average couple, the experience is not the same for every couple (Kurdek, 1991; Kurdek, 1999; Markman & Hahlwag, 1993; Lawrence et al., 2008). Indeed, Belsky and Rovine (1990) identified four groups with distinct marital patterns. Across domains of relationship love, conflict, ambivalence, and maintenance behaviors, approximately 44 percent of couples (two of the four groups: one group experienced a steady decline while the other experienced period of relative stability followed by a decline) reported deterioration, approximately 34 percent reported no change, and approximately 21 percent reported modest improvements in relationship functioning. The variability in changes over the transition to parenthood has led researchers to examine possible explanations for why some couples experience the transition to parenthood as more detrimental than others. Predictors of this variability are important to understand so that appropriate treatments can be administered to reduce the risk for a decline in relationship satisfaction and increase in depression.

Several individual factors predict variability in couples' relationship functioning after birth. The first individual factor that has been shown to predict changes in

relationship satisfaction after birth is an individual's level of depression during pregnancy (e.g., Cox, Paley, Burchinal, & Payne, 1999). Moreover, after birth, new parents are at elevated risk for developing depression that was not evident during pregnancy (Glade et al. 2005; Cutrona, 1982). When a new parent becomes depressed their isolation can negatively affect their relationship with their partner (Glade et al.), likely because social withdrawal tends to be a salient characteristic of depression. Indeed, prolonged postpartum depression in mothers has been linked to both a lack of social support or marital dissatisfaction and stress around the time of pregnancy or delivery (Cutrona).

Secondly, characteristics in individuals' family of origin such as general conflict, divorce, and violence also influence the couple's current relationship. Specifically, disturbances in an individual's family of origin is linked to lower relationship satisfaction and higher divorce potential in that individual's current relationship (Amato & Rogers, 1997; Bumpass, Martin, & Sweet, 1991; McLanahan & Bumpass, 1988). This same trend has also been found in several studies looking at the transition to parenthood (Cowan & Cowan, 2000; Perren, Wyl, Burgin, Simoni, & Klitzing, 2005). Cowan and Cowan found that couples who described their families of origin to have high levels of conflict showed a greater drop in marital satisfaction from pregnancy to 18 months post-birth than other couples whose families were without conflict. Similarly, couples that recalled negative interactions in their families of origin show more negative changes across the transition to parenthood (Perren et al.). Another family of origin factor that puts a couple at risk for low relationship satisfaction is if the man's father was violent

towards the mother. Individuals most likely to be in an abusive relationship themselves are those who witnessed and/or experienced violence in their family of origin as children (Schwartz, Hage, Bush, & Burns, 2006). Pelcovitz and Kaplan (1994) found that boys who observed abuse in their parent's relationship were 1,000 times more likely to become a perpetrator of abuse than boys who did not witness familial violence (Straus, Gelles, & Steinmetz, 1980).

Finally, a last individual characteristic that predicts post-birth relationship changes is whether one or both partners have been previously married. Remarried couples report less marital satisfaction than couples in their first marriage and are at greater risk for divorce (Martin & Bumpass, 1989; Vemer, Coleman, Ganong, & Cooper, 1989; White & Booth, 1985). Moreover, one partner entering a second marriage with a child from their previous marriage places additional stress on the couple (Kinnunen & Pulkkinen, 2003).

In addition to individual factors that predict variability in couples' relationship functioning after birth, several relationship factors have also been found to be important. One such characteristic is pre-marital cohabitation. Nomaguchi and Milkie (2003) found that the experience of becoming a parent is less positive for unmarried men and women; these individuals report lower self-efficacy and higher rates of depression upon becoming a parent. Woo and Raley (2005) found that, for women, cohabitation is associated with poorer outcomes for the transition to parenthood. Furthermore, the children of cohabiting relationships are almost twice as likely to experience their

parent's separation by age three than children of married couples (Osborne, Manning, & Smock 2007).

Violence in a couple's current relationship, another couple risk factor, places them at greater risk for declines in relationship satisfaction after the birth of a child. The surprisingly high evidence of physical aggression in newlywed couples led researchers to believe that the presence of violence wears down the quality of those marriages (Lawrence & Bradbury, 2001; O'Leary et al., 1989). In comparison to marriages with non-abusive couples, couples who experience domestic violence were more likely to experience an increase in divorce related thoughts and a decrease in marital satisfaction (Heyman, O'Leary, & Jouriles, 1995). In all, most studies indicate that aggression is a precursor to marital dissolution and dissatisfaction (Lawrence & Bradbury, 2007). Many of these findings have been replicated several times with couples from dating relationships to marriages but not specifically over the transition to parenthood. Since there is a constant connection of violence with individual and relationship function, the present study proposes that these findings will remain supported when measured during the transition to parenthood.

The last couple risk factor is the couple's relationship satisfaction prior to the transition to parenthood. Cowan and Cowan (2000) suggest that relationship satisfaction before the birth of a child is one of the best predictors of how well a couple functions after the transition to parenthood. The approach a couple takes when communicating their emotions before pregnancy seems to be associated with post-birth marital functioning (Glade et al., 2005). For instance, the tendency to avoid issues and withdraw

from conflict is related to declines in marital satisfaction (Heinicke & Guthrie, 1996). Lawrence et al. (2008) also found that lower marital satisfaction during pregnancy was related to a greater decline in marital satisfaction after the birth of their child. Though links between marital satisfaction and post-birth functioning have been found, other studies suggest that how a couple functions together before the birth of the child has a significant, but not overwhelming impact of the quality of a relationship they will have after their baby is born (Glade et al.; Lindahl, Clements, & Markman, 1997). Cowan and Cowan's study (1988a) concluded that the birth of a child is not sufficient enough to create marital distress in a relationship where marital distress did not already exist. Instead, the transition to parenthood will most likely amplify the already existing difficulties between partners. Therefore couples that are experiencing difficulties in relationship functioning prior to the transition to parenthood are likely to experience declines in relationship satisfaction.

In addition to individual and couple risk factors, a third characteristic that has been found to have an impact on the transition to parenthood is the pregnancy characteristics. Specifically the planned nature and desirability of the pregnancy has an impact on relationship satisfaction after the birth of the child.

Research has shown that couples who have planned pregnancies are more satisfied than those who have unplanned pregnancies (Lawrence et al., 2008). Lawrence et al. found that the degree to which the pregnancy was planned determines the amount of decline in marital satisfaction that couples experience after the transition to parenthood. Whereas the Lawrence et al. studies noted that the planning of one's

pregnancy was an important factor in determining post-birth relationship satisfaction, the Cowan and Cowan (2000) place their emphasis on the desirability of the pregnancy as the determinate for relationship satisfaction after birth.

Research also suggests that couples with undesired pregnancies have lower relationship satisfaction than those who have desired pregnancies (Cowan & Cowan, 2000). Cowan and Cowan identified three types of couples, who all had the same level of marital satisfaction during the pregnancy, but experienced the transition to parenthood in distinct ways. “The Planners” were couples that actively planned to get pregnant. Eighteen months after birth of their first child, Planners showed only a slight decline of marital satisfaction when compared to the baseline. “Acceptance-of-fate” couples were couples that did not plan to have a child but were pleased upon learning of the pregnancy and where both partners were happy to make the transition to parenthood. Acceptance-of-fate couples showed a modest decline in the 18-month measure of relationship satisfaction, because this group scored higher on marital satisfaction during pregnancy than the Planners. Finally, “Yes-no” couples were couples with an unplanned pregnancy where one or both partners had unresolved conflict about having the baby and were not welcoming the transition to parenthood. Eighteen months after birth, Yes-no couples showed a significantly larger drop in relationship satisfaction than Planners or Acceptance-of-Fate couples. This decline in satisfaction, on average, was more than two standard deviations from the average Yes-no couples in the range of significant marital distress.

However, the Cowan and Cowan (2000) study did not look at other measures of risk factors that could contribute to the decline in relationship satisfaction during the transition to parenthood. Similarly, while the Lawrence et al. (2008) study measured both marital satisfaction and the degree to which a pregnancy was planned, the study did not determine whether the planned nature of the pregnancy continued to predict post-birth functioning after controlling for a couples' relationship satisfaction before birth.

Although research on the planned and desired nature of pregnancy is important, it remains unclear whether these risk factors are independent of the aforementioned individual and relationship risk factors reviewed above. Therefore, it is important to examine whether these three pregnancy groups differ as defined by Cowan and Cowan (2000) on other pre-birth factors that have been shown to impact the transition to parenthood. As reviewed above, studies have shown that individual factors (for example, family of origin, previous marriage, depression) and couple factors (for example, pre-marital cohabitation, relationship satisfaction, and low-level relational violence) may also negatively impact relationship satisfaction.

The present study will examine whether there are any distinctive patterns of individual and couple risk factors among Planners, Acceptance-of-fate couples, and Yes-no couples. Specifically, it is hypothesized that the Yes/No individuals will have more individual and couples risk factors than either the Planners or Acceptance of Fate individuals.

## II METHODS

### *Participants*

A total of 373 individuals (175 heterosexual couples, along with 5 men and 18 women whose partner's were not screened) participated in the present study. Most individuals were married (342), but a small subset (37) were cohabiting with their partners. Age ranged from 17 to 47, with a mean of 28. Couples were recruited through various methods: flyers were placed on local community boards, pamphlets were distributed in local clinics and doctor's offices, and short presentations were given at childbirth preparation classes. Recruitment was done as part of the larger experiment, which provides interventions for couples having their first baby. The data for the current study was collected from all the individuals and couples who contacted the study before eligibility for the larger study was determined.

### *Procedure*

Individuals who expressed interest in the study were contacted two months before their due dates. These potential participants for the larger study were then screened over the phone and disqualified if they met the following criteria: moving out of the local area, not living together, not either partner's first child, severe domestic violence, due date too close to complete study protocol, uncomfortable speaking English, or if they were being treated for any psychological problems that would confound with the study's interventions. Participants were asked (separately and confidentially from their partners) to give information on whether or not they had



planned to have a child at the present time, whether now that they are having a baby, and if they could do it over again whether they would want to be having the baby right now in addition to other pertinent questions regarding the couples' current stress levels and relationship satisfaction. If a couple was unable to be reached in three attempts spread out over the course of six days, without any attempt on the participants' part to contact the study, the present study assumed disinterest and discontinued pursuit of those individuals. Eligible couples continued with the larger study by attending an in-person assessment held at Texas A&M University.

### *Measures*

*Dyadic Adjustment Scale (DAS)*: The DAS is the most widely used measure of relationship adjustment and satisfaction in the couple literature. The DAS consists of 32-items and includes a mixture of agreement, behavioral, and affective items assessing a number of relationship domains. In the present study, a short version of the DAS, the DAS-4 was used (Sabourin, Valois, & Lussier, 2005). The DAS-4 displays an alpha level of 0.91 and a test retest reliability of 0.87 for men and 0.83 for women (Sabourin et al.).

*Depression subscale from the Brief Symptom Inventory (BSI)*: The six-item depression scale from the Brief Symptom Inventory (Derogatis, 1993) was used in the present study. This subscale has an alpha level of 0.85 and a test retest reliability of 0.84 (Derogatis).

*Revised Conflict Tactics Scale:* This 10 question scale is a subset of a 39-question scale used to assess relationship aggression. The present study uses the psychological aggression, physical assault, and injury subscales. Correlations of the short form with the full revised Conflict Tactics Scale range from 0.72 to 0.94 (Straus & Douglas, 2004).

*Assessment of planned and desired nature of pregnancy:* Two questions were asked to determine whether the individual would be classified as a Planner, an Acceptance of Fate participant, or a Yes/No individual. The first question is “Was this a planned pregnancy?” followed by “If you could do it over again, would you want to be having a baby right now?”

*Other Measures:* To obtain information of the couple’s relationship status, participants were asked if they were currently living with their partner and if they were currently married to their partner. Also each participant was asked questions regarding their family of origin; specifically whether there was a history of divorce or violence. Lastly, individual measures were taken in regards to the participant’s age and history of previous marriages.

### *Statistical Analyses*

Statistics were run on individuals separately by gender because the study had a large number of partially screened couples. Group status, (Planner, Acceptance of Fate,

or Yes/No) was the independent variable. Parental divorce, paternal violence for men, previous marriages, depression, marital status, relationship violence, and relationship satisfaction were the dependent variables.

Depression and relationship satisfaction were measured on a continuous scale. Analyses of this data included one-way ANOVAs and Tukey tests. All the other dependent variables were dichotomous measurements. The scores were analyzed using Chi Square measurements in addition to Phi and Cramer's V tests.

#### *Clarification of Pregnancy Groups*

Using Cowan and Cowan's previous research (2000), the present study then divided couples into the three groups: Planners, Acceptance of Fate individuals, and Yes/No individuals. Unlike previous studies, we defined individuals, rather than couples, according to whether they indicated the pregnancy was planned and/or wanted. This procedure slightly altered the Cowan and Cowan (2000) study's definitions. An individual will still be classified as a Planner if they planned on having the baby and still want the pregnancy close to the due date. An Acceptance of Fate individual is one who was not planning to have a baby but is happy to be about two months before the baby is born. The Yes/No individuals are a little more different. A participant who is classified as a Yes/No individual is one who does not want the baby when the due date is quickly approaching. Note that the present study still counts the individual as a Yes/No participant regardless if the pregnancy was planned or not. For example, if the individual originally planned for the child but not longer want to be having a baby near the birth of

the baby. Another reason the present study looked at the data individually rather than as a couple is because often couples often disagree about the planned nature and desirability of the pregnancy. For instance, in the present study about 20 percent of the participants did not agree.

### III RESULTS

A repeated measures analysis of variance (ANOVA) model for the continuous data was used to determine if there were significant differences found between the three groups on the depression subscale of the Brief Symptom Inventory and the Dyadic Adjustment Scale. Any differences that were significant ( $p < .05$ ) or marginally significant ( $p < .10$ ) were further pursued with post-hoc Tukey ANOVAs using an alpha level of .05. Dichotomous data from Couple Conflict measures, relationship characteristics, and individual measures were analyzed using Chi-Square tests. Any differences that were significant ( $p < .05$ ) or marginally significant ( $p < .10$ ) were further explored by running additional Chi-Square tests to obtain individual group comparisons using an alpha level of .05.

*Relationship Satisfaction:* DAS scores revealed significant omnibus group differences among men ( $F(2, 176) = 17.12, p < .001$ ) and women ( $F(2, 187) = 7.86, p < .01$ ). Comparisons of individual groups of the men displayed that there were significant differences between the Yes/No individuals ( $M = 15.94$ ) and Planners ( $M = 19.09$ ;  $p < .001$ ) as well as between the Yes/No individuals and the Acceptance of Fate individuals ( $M = 18.62$ ;  $p < .001$ ). Similarly, women showed individual group differences between Yes/No individuals ( $M = 17.40$ ) and both Planners ( $M = 19.19$ ;  $p < .001$ ) and Acceptance of Fate ( $M = 18.70$ ;  $p < .05$ ) individuals.

*Depression:* BSI depression subscale scores revealed omnibus differences in both the group of men ( $F(2, 172) = 3.93, p < .05$ ) and women ( $F(2, 182) = 7.88, p < .01$ ). Individual group comparisons of men resulted in a trend of significance between the Planners ( $M=0.89$ ) and Yes/No individuals ( $M = 1.93; p < .10$ ). Further testing of the women's data revealed individual group differences between Planners ( $M= 1.18$ ) and Yes/No individuals ( $M= 2.64; p < .01$ ), as well as between Planners and Acceptance of Fate individuals ( $M=1.88; p < .05$ ).

TABLE 1

*Group means and standard deviations of continuous risk factors*

	Planners	Acceptance of Fate	Yes-no
	<i>Men</i>		
Depression	.89 (1.37)	1.44 (1.76)	1.93 (2.63)
Relationship Satisfaction	19.09 (1.58)	18.62 (1.59)	15.94 (4.42)
	<i>Women</i>		
Depression	1.18 (1.40)	1.88 (1.79)	2.64 (2.85)
Relationship Satisfaction	19.19 (1.53)	18.70 (2.24)	17.40 (3.18)

*Married versus Cohabiting:* Overall, the three groups significantly differed in their probability of being married versus cohabiting for both men ( $\chi^2(2) = 1.15, p < .01$ ) and women ( $\chi^2(2) = 3.00, p < .001$ ). For men, Yes/No individuals were significantly more likely to be in a cohabiting relationship than were Planners ( $\chi^2(1) = 1.16, p < .01$ ) or Acceptance of Fate individuals ( $\chi^2(1) = 4.99, p < .05$ ). Similarly for women, the Planners displayed significant findings against the Acceptance of Fate individuals ( $\chi^2(1) = 1.99, p < .001$ ) as well as the Yes/No individuals ( $\chi^2(1) = 3.22, p < .001$ ).

*Family of Origin Factors:* When examining the amount of violence in the men's family of origin, significant omnibus differences between the three groups of men were found ( $\chi^2(2) = 6.83, p < .05$ ). Specifically, Planners were significantly less likely to be from violent homes than Yes/No individuals ( $\chi^2(1) = 6.94, p < .01$ ).

Furthermore, findings also revealed significance specifying that the domestic violence exposed to the men in the present study was where the violence in the family of origin was directed at the mom and originating from the dad ( $\chi^2(2) = 6.59, p < .05$ ). Once again here, Planners were significantly less likely have fathers who were violent towards their mothers than Yes/No individuals ( $\chi^2(1) = 6.94, p < .01$ ).

The present study did not find any significant findings in regarding if whether one partner's being parents divorced affected their possibility of having a planned, unexpected, or unwanted pregnancy. .

*Psychological Abuse:* Data for women reveal an overall significant group difference among those who experienced psychological abuse ( $\chi^2 (2) = 8.17, p < .05$ ). Significant individual group differences were found between the Planners and Acceptance of Fate individuals ( $\chi^2 (1) = 4.38, p < .05$ ) as well as between the Planners and Yes/No individuals ( $\chi^2 (1) = 5.39, p < .05$ ). In both cases, women with unplanned or undesired pregnancies were more likely to experience psychological abuse from their partners than women who were Planners.

*Relationship Violence:* Omnibus tests of whether one partner was experiencing any form of relationship violence did not show any significant differences for men ( $\chi^2 (2) = 4.04, p > .10$ ) or women ( $\chi^2 (2) = 3.43, p > .10$ ).

*Previous Marriage:* There are no significant findings regarding whether one of the partners was previously married to another before commencing on the transition to parenthood with their current partner.



TABLE 2

*Chi-square valid percentages of dichotomous risk factors*

	Planners	Acceptance of Fate	Yes-no
	<i>Men</i>		
Not Married	6.10%	9.80%	33.30%
Previous Marriage	7.10%	3.90%	6.70%
Parental Divorce	21.20%	27.50%	33.30%
Violence in Family of Origin	3.50%	9.80%	20.00%
Father to Mother Violence	3.50%	8.00%	20.00%
Psychological Abuse	61.30%	66.00%	40.00%
Relationship Violence	3.60%	11.80%	6.70%
	<i>Women</i>		
Not Married	1.70%	21.60%	34.80%
Previous Marriage	6.70%	8.00%	9.10%
Parental Divorce	21.80%	32.00%	31.80%
Violence in Family of Origin	3.40%	6.00%	9.50%
Father to Mother Violence	1.70%	4.10%	5.00%
Psychological Abuse	50.40%	68.00%	77.30%
Relationship Violence	1.70%	4.00%	9.10%

#### IV DISCUSSION

The present study examined whether individual or couple risk factors were associated with whether the pregnancy of the couple was planned, unexpected, or unwanted. Thus far previous literature has not searched for patterns of individuals and couples risk characteristics across the three pregnancy groups that could serve as alternative explanations for the association of pregnancy characteristics with post-birth relationship changes. The present study found that pregnancy characteristics were indeed related to other individual and couple risk factors. Specifically, across measures of relationship satisfaction, depression, whether or not the couple was married, family or origin, psychological abuse, and relationship violence, Planner individuals were the lowest risk; Yes/No individuals were the highest risk and Acceptance of Fate individuals fell somewhere in a mid-level risk group.

In addition, several of the group differences found between Planner, Acceptance of Fate, and Yes/No individuals differed by gender. Specifically, men who reported not wanting their partners to be pregnant (i.e., Yes/No men) were less likely to be married than were Planner and Acceptance of Fate men; however, women with unplanned pregnancies (i.e., Acceptance of Fate women and Yes/No women) were less likely to be married than Planner women. For Men, there was also a steady increase in reported violence in the family of origin from Planners, to Acceptance of Fate individuals, to Yes/No individuals. The same trend was found when men were asked if their father acted violently towards their mother. Two other trends that were inconsistent by gender were the reports of psychological abuse and relationship violence. For relationship

violence and psychological abuse, women Planners were least likely to experience psychological and physical abuse, Yes/No women were most likely to be abused, and Acceptance of Fate women were a middle group. In contrast, men who were categorized as Acceptance of Fate individuals were more likely to be in a psychologically abusive or violent relationship than Planners or Yes/No men.

The current study also revealed discrepancies in pre-birth levels of satisfaction among Planners, Yes/No couples and Acceptance of Fate couples. These results were consistent with recent findings (Lawrence et al., 2008) which showed that husbands and wives who were more satisfied with their marriages prior to the pregnancy were more likely to have planned pregnancies. The present study indicated that the level of a couple's satisfaction post-pregnancy was related to whether that couples was married and whether they had a planned pregnancy. However, the desirability of that pregnancy was not related to

The results of the present study should be considered in the context of several study limitations. First, the present study did not examine post-birth change; as a result, we were not able to determine whether the planned or desired nature of pregnancy is able to predict post-birth change after controlling for other individual and couples risk factors. Another limitation was that present study analyzed the data at the individual, rather than the couple, level. Examining responses of both partners together could potentially reveal trends within the couples and how the couples are functioning as a unit (e.g. Do partners agree on the desirability and planned nature of the pregnancy? Are both partners equally satisfied in the relationship?)

One potentially fruitful avenue of future research would be to study couples where each partner would be classified into a different planning group. This approach would enable us to gain insight into the dynamics of relationships in which one partner, for instance, believed the pregnancy was planned while the other partner did not. Other research might examine whether focusing on treating or preventing these risk factors in couples could help to stabilize their relationship satisfaction over the transition to parenthood. Additionally, a strong experimental design might enable researchers to make statements about causality. For instance, are individual and couple risk factors or planned, unexpected, or unwanted pregnancy more responsible for the decline in relationship satisfaction after birth? As our research displays, there are confounding variables with whether a couple has a planned, unexpected, or unwanted birth with the number of individual and couples risk factors.

The present study examined whether a number of individual and couples risk factors were related to whether a couple has a planned, unexpected, or unwanted birth. Results revealed a pattern of individual and couple risk factors across the Planner, Acceptance of Fate, and Yes/No groups. The present study was the first to search for these patterns of factors across the three groups of couples as they begin their transition to parenthood. These findings illustrated a close connection between pregnancy characteristics and individual and couple risk factors and raise additional questions for future studies to explore in greater depth.

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## CURRICULUM VITA

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### EDUCATION

Texas A&M University College Station, TX  
 Bachelors of Art's Degree in Psychology August 2004 - May 2008  
 Minor in English and Sociology  
 GPR: 3.65/4.0, *cum laude*  
*Honors in Psychology*  
*University Honors*  
*Foundation Honors*

### RESEARCH

Texas A&M University Undergraduate Research Fellows Program Class of 2008

- Thesis: "Honey, I'm pregnant!" Planned, unexpected, and unwanted transitions to parenthood
- Collaborated with faculty advisor in research variable in the transition to parenthood
- Skills: Phone screen, data entry, data organization and management
- Cumulating with a publishable scholarly thesis

Texas A&M University Psychology Clinic, College Station, TX

- Student lab worker from January 2007 to present
- Conducted work on couples research projects; Veteran Administration Couple Therapy Study and Our First Baby Project
- Assisted with data entry, phone screens, in-person assessments, and developed lab documents

### VOLUNTEER EXPERIENCE

Student Counseling Services Helpline, Texas A&M University

- Volunteer January 2007 to August 2008, at least 500 hours
- Answering Texas A&M University's crisis line
- Skills: Intensive training in active listening, QPR Certification, crisis intervention, a variety of training to reflect different types of calls (inter/intrapersonal conflicts, sexual orientation, eating disorders, grief counseling, depression, academic stresses, etc...)

**HONORS AND AWARDS**

- Honors Incentive Award Recipient (2006, 2007)
- TAMU Academic Excellence Scholarship Recipient (2006, 2007)
- Distinguished Student Award (fall 2004 - spring 2005, spring 2006 – spring 2008)
- Dean’s List (fall 2004, spring 2005, spring 2007, fall 2007, spring 2008)
- Phi Eta Sigma (spring 2005- present) *Honor Society*
- Psi Chi (fall 2006 – spring 2007) *Psychology Honor Society*
- Undergraduate University Research Fellows (August 2007 – May 2008)
- Presentation Awards: Texas A&M Student Research Week (presented on March 25, 2008)
  - Title: “Honey, I’m pregnant!” Planned, unexpected, and unwanted transitions to parenthood
  - 2<sup>nd</sup> place winner in People, Places, and Culture Taxonomy, 1<sup>st</sup> place Session Winner