

PROPOSAL SUMMARY: Provide program description (refer to instructions for more information regarding requirements).

Rationale: In the United States, approximately 40% of marriages result in divorce (Renshaw, McKnight, Caska, & Blais, 2011). In light of this troubling statistic, what then is the secret to preserving a marriage? To answer this question and to identify problematic aspects of relationships, measures of relationship satisfaction were created (Locke & Wallace, 1959). Today, dozens of measures of relationship satisfaction and relationship adjustment exist (Graham, Diebels, & Barnow, 2011). With so many options to choose from, how does a counseling psychologist select the appropriate scale? The current paper presents a critical review of the five most frequently utilized measures of relationship satisfaction. Strengths, limitations, and recommendations are made.

Method: The present paper utilized PSYCINFO to access peer-reviewed journal articles. Inclusion criteria for the present study were that articles needed to evaluate the efficacy of a relationship scale for romantic partners. As the present study examined marital functioning in the United States, articles that included non-U.S. participants were excluded.

Results: Over the last 35 years the Dyadic Adjustment Scale (DAS) has been the most frequently utilized measure of relationship satisfaction (Funk & Rogge, 2007). The DAS has demonstrated good construct validity and criterion-related validity (Antill & Cotton, 1982). It has also demonstrated good internal consistency, with a Cronbach's alpha of .96 (Spanier, 1976). The Marital Adjustment Test (MAT) has demonstrated good criterion-related validity and good convergent validity (Sharpley & Cross, 1982). Locke and Wallace (1959) also reported that the MAT was able to identify "maladjusted" couples with a 96% accuracy rate. The Quality of Marriage Inventory (QMI) was found to have good convergent validity with the Kansas Marital Satisfaction Scale (Callahan, 1996). It was also determined to have good discriminant validity with measures of psychopathology (Callahan, 1996). Heyman et al. (1994) concluded that it had good concurrent validity and good test-retest reliability. The Relationship Assessment Scale (RAS) has demonstrated good criterion-related validity and good discriminant validity (Vaughn & Baier, 1999). It has also been shown to have good internal consistency and acceptable concurrent validity (Renshaw, McKnight, Caska, & Blais, 2011). Finally, the Kansas Marital Satisfaction Scale (KMSS) has demonstrated good convergent validity and good test-retest reliability (Schumm et al., 2008). It has also demonstrated good concurrent validity with the QMI as well as discriminant validity with measures of psychopathology (Callahan, 1996). The KMSS was also shown to have high internal consistency, positive predictive validity, and criterion-related validity (Schumm et al., 1988).

Discussion: While all of the previously discussed measures are valid scales of relationship satisfaction, the DAS is the most researched and validated scale available (Funk & Rogge, 2007). The DAS has been validated for use with numerous populations, including persons with disabilities, low SES individuals, and ethnic minorities. As such, it is the recommendation of this paper that when clinicians desire to measure relationship satisfaction, they utilize the DAS.