Prenatal Expectations and Marital Satisfaction Over the Transition to Parenthood

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Associations among prenatal expectations, the extent to which expectations were confirmed or disconfirmed, and trajectories of marital satisfaction over the transition to parenthood were assessed 7–11 times in a sample of newlywed couples. Piecewise growth curve analyses were conducted to examine levels of marital satisfaction at the beginning of marriage and rates of change over 2 periods: from the beginning of marriage through the 3rd trimester of pregnancy and from the 3rd trimester of pregnancy through 18 months postpartum. Postpartum marital decline was greater than decline from marriage through pregnancy. Spouses who were more satisfied at the beginning of marriage reported higher expectations. There was marked variability in the extent to which prenatal expectations were confirmed; some expectations were unfulfilled, others were met, and still others were surpassed. Associations between the extent to which expectations were confirmed and rates of change in marital decline differed as a function of the specific type of expectation. Implications for understanding vulnerability and resiliency in couples negotiating the transition to parenthood are discussed.

Keywords: transition to parenthood, expectations, marital satisfaction, couples, growth curve analyses

Millions of couples undergo the transition to parenthood each year (U.S. Census, 2002), and couples expecting the birth of their first child typically anticipate this event with enthusiasm and excitement (e.g., Feldman & Nash, 1984). The experience of parenthood, however, is often quite different from what couples expect (e.g., Belsky, Ward, & Rovine, 1986), and the impact of the transition to parenthood on marital satisfaction remains unclear. Social cognition theorists suggest that prenatal expectations and the degree to which those expectations are confirmed or disconfirmed—defined in the present study as the extent to which prenatal expectations are met, violated, or surpassed—likely play important roles in predicting marital decline. Expectations allow people to believe that they can understand, predict, and control events in their lives and preclude trial-and-error learning in encounters with new people and situations. The development and application of expectations is adaptive: It allows efficient and effective interpersonal interactions. However, when expectations are based on faulty data or are applied illogically, they can lead to individual or interpersonal difficulties. Further, people’s expectations tend to have a positive bias such that individuals generally rate their lives as moderately positive (e.g., Sears, 1983), remember and judge positive material more easily (Hampson & Dawson, 1985), and tend to make positively biased judgments. With respect to the transition to parenthood, this suggests that individuals generally will have positive expectations about their own ability to navigate this transition.

In addition, there is evidence that violations of prenatal expectations are associated with lower levels of marital satisfaction (e.g., Belsky, 1985). However, little is known about the specific nature of the links among prenatal expectations, the extent to which those expectations are confirmed, and rates of change in marital satisfaction across the transition to parenthood. Are levels of prepregnancy satisfaction associated with prenatal expectations or the extent to which expectations are met? And if the violation of expectations is associated with marital decline, does it necessarily follow that marital satisfaction increases or remains stable when expectations are met or surpassed? In this study, we examined associations among expectations, the extent to which those expectations were confirmed or disconfirmed, and trajectories of marital satisfaction over the transition to parenthood.

There is consistent evidence that the transition to parenthood has at least a temporary impact on marital satisfaction
(e.g., Belsky, Spanier, & Rovine, 1983; Shapiro, Gottman, & Carrere, 2000). Some researchers have suggested that declines in marital satisfaction during the transition to parenthood initiate a downward spiral from which some couples never fully recover (e.g., Moss, Bolland, Foxman, & Owen, 1986). Others have suggested that the effect of the transition to parenthood on marital satisfaction is nonexistent, small, transient, or even beneficial for many couples (e.g., Cowan & Cowan, 1999; Cox, Paley, Burchinal, & Payne, 1999).

There has been a great deal of interest in how prenatal expectations are associated with change in the marital relationship during the transition to parenthood. In general, when spouses’ expectations are violated, there are increases in marital conflict and declines in marital satisfaction (e.g., Belsky, 1985). One explanation for this effect is that expectations may be a self-fulfilling prophecy such that those who expect the worst may report more negative experiences than do those who hold more positive expectations because they inadvertently contribute to the development of the very situation they expect (Snyder, 1984). Consistent with this perspective, women’s negative expectations about motherhood are associated with negative postnatal attitudes, and positive expectations are associated with positive postnatal attitudes (Coleman, Nelson, & Sundre, 1999). Alternatively, individuals with unrealistic or overly positive expectations may be at risk for being disappointed by their experiences. Women who report a larger discrepancy between expectations and subsequent experiences have more difficulty adjusting to parenthood than do women who report a smaller discrepancy (Kach & McGhee, 1982), and postpartum adjustment is particularly difficult for women whose experiences are worse than they had anticipated (Kalmbuss, Davidson, & Cushman, 1992). Thus, expectations and violations of those expectations are associated with the adjustment to parenthood, broadly defined, at least for women. However, these studies do not speak to the specific nature of difficulties in adjustment, such as difficulties with marital satisfaction. They also do not speak to the extent to which expectations may be met or surpassed and the effect of those phenomena on changes in marital satisfaction over the transition to parenthood.

There are three primary methodological limitations to the existing research on expectations and marital satisfaction over the transition to parenthood. First, the definitions of expectations are very broad, and it is difficult to link them to specific mechanisms of change in marital well-being. An exception is the focus on violations of expectations about child care, which is useful but perhaps too narrow in scope, limiting researchers’ ability to predict much variance in marital functioning. Second, there has been tremendous variability in operational definitions of expectations. For example, participants are asked to either rate specific domains of expectations or report on “expectations for the transition to parenthood,” broadly defined, and the data-gathering method may be interview or self-report. Third, research on the transition to parenthood has been hindered by common methodological factors: (a) uncontrolled variability in samples and measures, (b) an absence of data collected prior to pregnancy, (c) an absence of data collected beyond the first 6–12 months after the baby is born, (d) lack of attention to fathers, and (e) failure to distinguish between rates of marital change prior to the birth of the first child and marital change after the child is born. (See Lawrence, Rothman, Cobb, Rothman, & Bradbury, 2007, for a detailed discussion of these issues.) We have attempted to address each of these limitations in the present study.

There were three aims to the present study. The first aim was to examine the nature of change in marital satisfaction before and after the birth of the first child. Although others have examined growth curve models of marital change over the transition (e.g., Cox et al., 1999; Shapiro et al., 2000; Van Egeren, 2003), to our knowledge, this is the first study in which rates of change (slopes) of marital satisfaction have been compared pre- and postpregnancy in a piecewise model. We examined levels of satisfaction at the beginning of marriage, rates of change in satisfaction from the beginning of marriage through the third trimester, and rates of change in satisfaction from the third trimester up to 18 months postpartum. This approach allowed us to examine whether, as we expected, rates of marital change varied from pre- to postpregnancy and whether there were different predictors of change in pre- and postpregnancy marital satisfaction.

The second aim was to examine husbands’ and wives’ prenatal expectations about the transition to parenthood and the degree of confirmation of those expectations across five domains: infant temperament, feelings about being a parent, competency as a parent, outside help and emotional support, and division of child-care labor and satisfaction with that division. We expected these domains to be sufficiently distinct so as to support a multidimensional examination of expectations across the transition to parenthood. We also expected that there would be significant variability in the associations between prenatal expectations and postnatal perceptions such that, consistent with prior research, a significant proportion of husbands and wives would report violations in their expectations (things were worse than they expected). However, we also expected to find a nontrivial number of husbands and wives whose postnatal perceptions either met or surpassed their prenatal expectations, allowing us to examine the influence of met or surpassed expectations on marital satisfaction trajectories.

The third aim was to assess whether expectations, and the extent to which those expectations were confirmed or disconfirmed, were associated with trajectories of marital satisfaction before and/or after the third trimester. Although longitudinal associations between expectations and marital satisfaction have been reported, analyses separating rates of change in marital satisfaction before and after the birth of the child have not been examined. Using piecewise growth curve modeling techniques, we estimated the temporal links among expectations, confirmation of those expectations, and marital satisfaction in three ways. First, we examined associations between prepregnancy levels of marital satisfaction (at 3–6 months of marriage) and prenatal expectations and the confirmation of those expectations. Second, we examined links between expectations and confirmation
of those expectations and the rates of change in marital satisfaction prior to the birth of the child (from 3–6 months of marriage through the third trimester of pregnancy). Third, we examined links between expectations and the confirmation of those expectations and rates of change in marital satisfaction after the birth of the child (from the third trimester of pregnancy up to 18 months postpartum). We expected husbands’ and wives’ prepregnancy levels of marital satisfaction to be positively associated with prenatal expectations. Couples who are more maritally satisfied at the beginning of marriage demonstrate a selection effect such that they become pregnant earlier than do couples with relatively lower levels of initial satisfaction (Lawrence et al., 2006). One possible explanation for this selection effect is that couples may hold more positive expectations for the transition to parenthood. Thus, we hypothesized that initial levels of marital satisfaction would be associated with more positive prenatal expectations for the transition to parenthood. Few published data address the links among expectations, the degree to which those expectations are confirmed, and differential changes in satisfaction before and after the birth of the child; thus, strong hypotheses on these points were not possible. We tentatively hypothesized that prenatal expectations would be negatively associated with prebirth rates of change in marital satisfaction such that couples who experienced declines in marital satisfaction from the beginning of the marriage through the third trimester would report relatively lower expectations for the transition to parenthood. We also hypothesized that confirmation of expectations would be associated with rates of change in marital satisfaction after the child was born. In particular, we hypothesized that violated expectations would be related to steeper declines in marital satisfaction from the third trimester up to 18 months postpartum. In contrast, we hypothesized that expectations that were met or surpassed would be related to stability of postpartum marital satisfaction.

Method

Participants and Procedure

Participants were a subset of 172 married couples who became first-time parents during a larger 4-year study. Eligibility required that spouses be at least 18 years old, have at least a 10th-grade education, speak English fluently, not be previously married, not have children, and not be expecting a child. Wives had to be younger than 35 years of age, to increase the possibility that they could become parents during the project. After a screening of marriage licenses, 3,606 couples who met criteria were invited to participate in a longitudinal study of marriage, and the 637 couples who responded to the letter were screened via telephone to ensure that they met all eligibility criteria. The first 172 couples who met criteria and kept their appointment for Time 1 data collection were included in the sample. Couples completed mailed questionnaires every 6 months over the 4-year study, providing eight waves of data.

Prior to each assessment point, participants responded via telephone to questions concerning changes in residence, marital status, and pregnancy status. Couples expecting a child were invited to participate in the transition to parenthood study, which involved completing an additional three waves of data (1 month prenatal and 3 and 6 months postpartum). Of the original 172 couples, 103 became first-time parents during the project, 77 participated in the transition to parenthood study, and 56 provided sufficient data to be included in the present analyses. Parents who participated in the transition to parenthood study did not differ from those who did not participate. To be eligible for inclusion in the present study analyses, participants had to provide data on marital satisfaction at a minimum of four points in time (including once within the first 6 months of marriage, once during the third trimester of pregnancy, and at 3 and 6 months postpartum), and they had to provide data on expectations in the third trimester and perceptions at 3 and 6 months postpartum. Spouses included in the analyses (n = 56) did not differ from ineligible spouses on demographic variables or marital satisfaction assessed within the first 6 months of marriage. Each eligible participant provided between 7 and 11 waves of marital satisfaction data for the present study.

At the time of the birth of their first child, couples averaged 32 months of marriage (SD = 10.4 months). Husbands averaged 30.2 years of age (SD = 4.1 years) and 16.2 years of education (SD = 2.4 years) and had a median income between $31,000 and $40,000. The majority of husbands (98%) were working outside of the home. Wives averaged 28.3 years of age (SD = 3.6) and 16.3 years of education (SD = 2.3 years) and had a median income between $21,000 and $30,000. Approximately 71% of wives reported working full time, and 11% were working part time. Twenty-five percent of husbands and 34% of wives identified themselves as members of ethnic minority groups; these figures compare favorably with U.S. Census data on ethnicity (43%) and with the marital literature, where minority participants are rare.

In sum, up to 11 waves of marital satisfaction data per participant were analyzed (up to 8 assessments at 6-month intervals and 3 assessments over the transition to parenthood). Marital satisfaction was assessed at all time points. Measures of expectations were collected 1 month prepartum, and measures of postnatal perceptions were collected at 3 and 6 months postpartum.

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1 Compared with those who did not respond, the 637 respondents were more likely to cohabit premaritally, had more education and higher status jobs, and included wives who were older.

2 Data from the larger project have been published elsewhere (e.g., Davila, Karney, & Bradbury, 1999); however, this is the first article to examine predictors from the Transition to Parenthood Study or to examine pre- and postbirth satisfaction trajectories. One recent study compared change in couples who did and did not have a child (Lawrence et al., 2006).
Measures

Marital satisfaction. The Quality of Marriage Index (QMI; Norton, 1983) consists of six items measuring global perceptions of marital satisfaction. Scores range from 6 to 45, and alphas for this measure exceed .95 for newlyweds (e.g., Karney & Bradbury, 1997).

Expectations and perceptions of infant temperament: The Infant Characteristics Questionnaire (ICQ; Bates, Freeland, & Lounsbury, 1979). The ICQ is a 26-item parent report of infant temperament. At 1 month prior to birth, questions were modified such that parents reported expected infant characteristics (e.g., “How much will your baby cry and fuss in general?”). The unmodified ICQ was administered at 3 and 6 months postpartum. Totals were derived by summing responses such that higher scores represent more difficult temperaments. Coefficient alphas ranged from .86 to .89 for husbands and wives.

Expectations/perceptions of how it would feel to be a parent: The Semantic Differential (SMD; Osgood, Suci, & Tannenbaum, 1957). Participants rated their perceptions of various concepts on 7-point scales anchored by opposite adjectives (e.g., bad–good; dissatisfied–satisfied; unpleasant–pleasant). Spouses rated 18 adjective pairs prenatal expectations and postnatal perceptions regarding how they felt about being a parent. Mean scores were calculated, with higher scores reflecting more positive expected or perceived feelings about parenting. Coefficient alphas ranged from .82 to .93 for husbands and wives.

Expectations/perceptions of competency regarding parenting skills: The Parental Competency Scale (PCS; Pasch & Bradbury, 1994a). Participants rated the extent to which they believed they could accomplish child-care tasks on an 11-point scale with response choices in 10-point intervals ranging from 0 (“I am not at all sure that I can do this”) to 100 (“I am very sure that I can do this”). Mean scores were calculated, reflecting perceived competency as a parent; higher scores represent greater competency. Coefficient alphas ranged from .75 to .95 for husbands and wives.

Expectations/perceptions of help and emotional support: The Parental Support Scale (PSS; Pasch & Bradbury, 1994b). Spouses rated 11 items on 7-point scales, indicating the help and support they expected to receive and actually received from their social support networks. A total score was created by averaging responses; higher scores represent more expected or perceived help and support. Coefficient alphas ranged from .75 to .89 for husbands and wives.

Expectations/perceptions about the division of child-care labor: “Who Does What?”—Revised (Cowan & Cowan, 1990). This 12-item measure of spouses’ perceptions of decision making and household and child-care responsibilities was revised to 14 items related to child-care tasks. Participants rated the expected (or perceived) percentage of time spent on each task. An overall contribution score was created by averaging across all items; scores represent the percentage of time the spouse expected to be or perceived being devoted to that task, relative to his or her partner. Coefficient alphas ranged from .80 to .92. For each task, spouses also rated on 7-point scales their satisfaction with the division of labor. Overall scores were obtained by averaging responses; higher scores reflect greater satisfaction. Coefficient alphas ranged from .78 to .97 for husbands and wives.

Scoring and Data Analyses

Higher temperament scores indicate a more difficult expected/perceived infant temperament. Higher scores on feelings about parenting, competency, help and emotional support, and satisfaction with division of labor indicate more positive expectations and perceptions. Division-of-labor values indicate the percentage of work spouses expected or perceived themselves to be doing relative to their partner. Scores representing the extent to which prenatal expectations were violated, met, or surpassed were computed by subtracting postnatal perception scores at 3 months postpartum from prenatal expectation scores.3 For temperament, positive difference scores indicate that postpartum perceptions were more positive than prenatal expectations, and negative scores indicate that postpartum perceptions were more negative than prenatal expectations. For feelings, competency, and help and support, positive difference scores indicate that postpartum perceptions were better than expected, and negative scores indicate that postpartum perceptions were worse than expected. For division of child care, positive difference scores indicate that spouses reported doing less work (compared with partners) than they expected, and negative scores indicate that spouses reported doing more work (compared with partners) than they expected.

Growth curve analyses (GCA; Raudenbush & Bryk, 2001) and the HLM 6 computer program (Raudenbush, Bryk, & Congdon, 2004) were used to create a piecewise growth model to examine initial level and rates of change in marital satisfaction over two time periods and correlates of growth in these time periods. A linear model specified by

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3 Difference scores are intuitively appealing and have shown adequate reliability when there is substantial variability within the study sample (Rogosa & Willett, 1983), as is the case in the present sample. However, it has long been argued that difference scores are confounded by main effects of the individual components and that any significant effects of difference scores may be influenced more strongly by one of the individual components versus the other (Griffin, Murray, & Gonzalez, 1999). Thus, when using difference scores as an approach to investigating change over time, it is imperative that the main effects be modeled and controlled, as we have done here. This approach is an attempt to address criticisms of the difference score and to investigate the effects of initial levels of expectations and the confirmation of those expectations on trajectories. Moreover, difference scores become less reliable to the extent that the two component scores are more highly correlated; component scores in this sample yielded low-to-moderate correlations.
the following equation was used: \( Y_{ti} = \beta_{0i} + \beta_{1i}(\text{Monthsti}) + \beta_{2i}(\text{Postmosti}) + \epsilon_{ti} \), where \( Y_{ti} \) represents marital satisfaction for individual \( i \) at Time \( t \), \( \beta_{0i} \) is the marital satisfaction of individual \( i \) at the first assessment (within the first 6 months of marriage), \( \beta_{1i} \) is the rate of change in marital satisfaction for individual \( i \) over the time period spanning from entrance to the study (within the first 6 months of marriage) through late pregnancy, and \( \beta_{2i} \) is the rate of change in marital satisfaction for individual \( i \) over the time period spanning from late pregnancy through the end of the study. \( \epsilon_{ti} \) is the residual variance for individual \( i \) with a mean of 0 and variance \( \sigma^2 \). \( \text{Monthsti} \) is the number of months that have elapsed since the first assessment for individual \( i \) at measurement occasion \( t \) with the first time point coded as zero. \( \text{Postmosti} \) is the number of months that have elapsed since the assessment taken in late pregnancy for individual \( i \) at measurement occasion. All slope estimates were group mean centered. At Level 2, we examined whether there were systematic differences between participants in terms of their satisfaction status at the beginning of marriage (intercept) or their rate of change across the two segments of the time series specified in the model. We also examined whether there were differential effects of time-invariant covariates on the prebirth versus postbirth rates of change. The following equations were specified at Level 2: \( \beta_{0i} = \gamma_{10i} + \gamma_{0i} + \epsilon_{0i}, \beta_{1i} = \gamma_{11i} + \gamma_{10i} + \epsilon_{1i}, \beta_{2i} = \gamma_{12i} + \gamma_{20i} + \epsilon_{2i}. \) In the equations, \( \beta_{1i} \) and \( \beta_{2i} \) (individual rates of change in marital satisfaction during the prebirth and postbirth periods, respectively) were modeled as a function of fixed effects, or mean rates of change for each period (i.e., \( \gamma_{11i} \) and \( \gamma_{20i} \). \( \epsilon_{1i} \) and \( \epsilon_{2i} \) are random effects. In the present study, the Level 2 predictors were the five types of prenatal expectations and confirmation of those expectations at 3 months postpartum. Level 2 predictors were grand mean centered. Error terms were random unless otherwise specified.

Results

Prenatal Expectations and Postnatal Perceptions of the Transition to Parenthood

Means and standard deviations of untransformed data for prenatal expectations, postnatal perceptions, and satisfaction with division of child care are shown in Table 1. Relative to husbands, wives generally held significantly more positive expectations and more positive perceptions of the transition to parenthood. Husbands and wives expected that wives would do approximately 75% of the child care (relative to their husbands), perceived the division of labor to break down that way after the child was born, and reported relative satisfaction with that division of labor. On

Table 1
Means for Prenatal Expectations and Postnatal Perceptions for Husbands and Wives

<table>
<thead>
<tr>
<th>Expectation/perception and time point</th>
<th>Husbands</th>
<th>Wives</th>
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<td>1 month before birth</td>
<td>85.4</td>
<td>13.3</td>
<td>80.2</td>
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<tr>
<td>3 months after birth</td>
<td>79.2</td>
<td>15.6</td>
<td>74.2</td>
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<tr>
<td>6 months after birth</td>
<td>74.2</td>
<td>14.5</td>
<td>68.9</td>
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<tr>
<td>Feelings about parentingb</td>
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<td>1 month before birth</td>
<td>5.9</td>
<td>.8</td>
<td>6.1</td>
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<td>3 months after birth</td>
<td>6.0</td>
<td>.7</td>
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<td>6 months after birth</td>
<td>6.1</td>
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<td>Competencyc</td>
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<td>1 month before birth</td>
<td>77.5</td>
<td>17.6</td>
<td>85.5</td>
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<tr>
<td>3 months after birth</td>
<td>85.7</td>
<td>10.1</td>
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<tr>
<td>6 months after birth</td>
<td>88.1</td>
<td>8.8</td>
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<td>1 month before birth</td>
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<td>3 months after birth</td>
<td>3.6</td>
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<tr>
<td>6 months after birth</td>
<td>3.5</td>
<td>1.5</td>
<td>3.9</td>
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<td>Division of labor (in %)e</td>
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<tr>
<td>1 month before birth</td>
<td>34.3</td>
<td>9.8</td>
<td>71.8</td>
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<tr>
<td>3 months after birth</td>
<td>25.6</td>
<td>11.0</td>
<td>77.0</td>
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<tr>
<td>6 months after birth</td>
<td>29.6</td>
<td>16.1</td>
<td>74.7</td>
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<td>Satisfaction with divisionf</td>
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<td>1 month before birth</td>
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a Higher numbers represent a more difficult temperament. b Higher numbers represent more positive feelings. c Higher numbers represent greater competency. d Higher numbers represent more help and support. e Percentages represent work done by oneself. f Higher numbers represent greater satisfaction.

* \( p < .05 \). ** \( p < .01 \). *** \( p < .001 \), two-tailed.
average, husbands’ and wives’ postnatal perceptions of the transition to parenthood generally were more positive than their prenatal expectations.

Correlations among prenatal expectations, among 3-month postnatal perceptions, and among 6-month postnatal perceptions are shown in Table 2. At 1 month prepartum, husbands’ and wives’ expectations were weakly correlated \((rs \text{ ranged from } .07 \text{ to } .29)\) with one exception. Correlations among husbands’ expectations were weak to moderate across \(r\)s ranged from \(.03 \text{ to } .52\) at 3 and 6 months, respectively. Correlations among wives’ expectations were also weak to moderate \((rs \text{ ranged from } .04 \text{ to } .53)\), supporting our decision to analyze data separately for husbands and wives.

### How Does Marital Satisfaction Change Before and After the Birth of the First Child?

We examined the course of satisfaction before and after the birth of the first child to determine whether marital satisfaction changed systematically during either time period. On average, marital satisfaction remained relatively stable for husbands, and systematically declined for wives, prior to the baby’s birth \((husbands, t = -2.24, p < .05)\). After the baby’s birth, on average, marital satisfaction systematically declined for husbands and wives \((husbands, t = -4.86, p < .001; \text{wives, } t = -4.48, p < .001)\). The rate of change in marital satisfaction for husbands after the birth of the first child \((\beta_2 = -.17)\) was more than eight times greater than the rate of change prior to the child’s birth \((\beta_1 = -.02)\). For wives, postbirth rate of change \((\beta_2 = -.18)\) was six times greater than rates of change prior to the child’s birth \((\beta_1 = -.03)\).

### Are Prenatal Expectations Associated With Marital Satisfaction Trajectories?

As shown in Table 3, wives who were more satisfied at the beginning of marriage expected to be more competent as parents \(\gamma = .09, t = 2.26, p < .05\). Regarding prebirth
satisfaction slopes, when wives’ decline in satisfaction was steeper prior to the birth of their child, they also expected to be less competent as parents (γ = −0.01, t = −2.07, p < .05). Husbands’ higher prenatal expectations about receiving help were associated with marginally steeper declines in satisfaction after the baby was born (γ = −0.05, t = −1.90, p < .10). Wives who expected infant temperament to be easier (γ = −0.01, t = −2.07, p < .05) and who expected to feel more positive as parents (γ = −0.12, t = −1.67, p < .10) experienced steeper declines postpartum.

Is Confirmation of Prenatal Expectations Associated With Marital Satisfaction Trajectories?

Regarding satisfaction at the beginning of marriage, to the extent that husbands were less satisfied initially, they viewed their infants as being easier than they expected (γ = −0.08, t = −2.90, p < .01; see Table 4). Initially more satisfied husbands also felt marginally more negative about parenting than they expected to feel (γ = −1.29, t = −1.90, p < .10) and did significantly less child care than they expected to do (γ = −1.0, t = −2.24, p < .05). Wives who were less satisfied initially also felt more negative about parenting than they expected to feel (γ = −1.61, t = −2.17, p < .05). Regarding prebirth satisfaction slopes, when husbands’ decline in satisfaction was steeper prior to the birth of their child, they also felt more negative about parenting than they expected to feel (γ = −0.06, t = 1.72, p < .10), experienced greater violations in expectations of help and support postpartum (γ = −0.03, t = −2.04, p < .05), and did more child care than they expected to do (γ = .004, t = 1.83, p < .10). Regarding postbirth change in satisfaction, husbands who received less outside help and support than they expected also experienced marginally steeper declines in satisfaction after the baby was born (γ = .04, t = 1.84, p < .10). Wives who felt more negative than they expected to feel about parenting experienced marginally steeper declines in satisfaction after the baby was born (γ = −.09, t = −1.82, p < .10).

Discussion

There were three aims to the present study. The first aim was to compare rates of change in marital satisfaction before and after the birth of the first child. Marital satisfaction remained stable for husbands and declined for wives over the initial (prechild) phase of marriage, which spanned an average of 2.7 years. Several recent investigations have found that becoming parents relatively early in marriage (within the first 4–6 years) is associated with higher initial marital satisfaction, particularly for wives (e.g., Shapiro et al., 2000). The segmentation of the time series in this study also allowed for the direct comparison of prechild and postchild trajectories of marital satisfaction. The sharp rate of decline for husbands and wives postpartum, following an extended period of stability in satisfaction levels for husbands and of relatively mild decline for wives, suggests that the transition to parenthood has a significant negative impact on marital satisfaction. The pattern of results in this study appears to be consistent with Moss et al.’s (1986) study appears to be consistent with Moss et al.’s (1986)
contention that the changes in marriage associated with the transition to parenthood might represent the first step in a deteriorating course of dyadic functioning. This study contributes to research efforts to identify the specific predictors of marital decline across the transition to parenthood (e.g., Cox et al., 1999; Shapiro et al., 2000; for a review, see Twenge, Campbell, & Foster, 2003) and supports the recent development of intervention programs targeting these risk factors and their consequences for marriage (for a review, see Cowan & Cowan, 1995).

The second aim was to examine associations between husbands’ and wives’ expectations and the extent to which those expectations were confirmed or disconfirmed during the transition to parenthood. As expected, husbands and wives had very different expectations and perceptions about the transition to parenthood across multiple domains. Although, on average, both had relatively high expectations and postnatal perceptions, men tended to expect less positive experiences than did women and tended to perceive their experiences as more negative. Despite significant differences between prenatal expectations and postnatal perceptions, men’s and women’s postnatal perceptions remained relatively stable across the first 6 months of parenthood. A nontrivial number of husbands and wives reported postnatal perceptions that either met or surpassed their prenatal expectations. McNulty and Karney (2004) found a similar distribution regarding spouses’ expectations for marriage, and these findings suggest the importance of examining these couples in future research to increase our understanding of the resiliency that exists among many couples as they navigate the transition to parenthood.

The third aim was to examine associations between prenatal expectations—and the extent to which those expectations were violated, met, or surpassed—and trajectories of marital satisfaction after the baby was born. Husbands and wives who held higher expectations across multiple domains experienced greater declines in marital satisfaction after the baby was born. Associations between the confirmation of expectations and trajectories of marital satisfaction varied as a function of the specific domain of the expectation and differed for husbands and wives, suggesting the importance of examining both husbands’ and wives’ data and the importance of conceptualizing expectations for the transition to parenthood as a multidimensional phenomenon.

The present study is unique among investigations of the transition to parenthood in that it combines the use of sophisticated statistical techniques that allow for examination of individual variability in change in marital satisfaction over time with multiple assessments of the marital system prior to the birth of the child and with multiple postpartum waves of data. In contrast to studies by Shapiro et al. (2000), Cox et al. (1999), and Van Egeren (2003), in

<table>
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<th>Measure</th>
<th>Coeff. (SE)</th>
<th>t(48)</th>
<th>Effect size r</th>
<th>Measure</th>
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<td>t(48)</td>
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Note. Entries printed in bold represent significant findings. Effect size $r = \sqrt{r^2/[r^2 + df]}$, H = husband; W = wife; Coeff. = coefficient.

† $p < .10$. * $p < .05$.  

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5 We thank one reviewer for offering the alternative explanation that higher expectations during pregnancy (associated with higher levels of satisfaction) might be related to greater decreases in satisfaction after birth because of regression to the mean.
which most of the above strengths are also present, more confidence can be placed in transition-specific conclusions regarding rate of change in satisfaction over the transition and correlates of this growth rate in the present investigation because the use of piecewise growth modeling procedures allowed for the segmentation of the time series into prechild and postchild phases.

Cox (1985) argued that “only with information concerning the prebirth characteristics of the couple and their relationship . . . can one begin to understand the ways in which becoming a parent precipitates changes in the marital relationship” (p. 396). A particular strength of the present investigation is that the initial assessments of the marital relationship are truly independent of the effects of the presence of the child and thus allow for a more refined understanding of how the arrival of a first child impacts the marital system and how various aspects of the marital relationship, assessed independently of the presence of the child, contribute to individual differences in the trajectory of marital satisfaction across the transition. Another strength of this investigation is that the duration of the postchild follow-up period is more substantial at 18 months postpartum than that of most transition to parenthood studies, where data collection ends sometime within the first postpartum year.

A few other strengths are worth noting. First, prior research has focused almost exclusively on wives, whereas the present study included an examination of both husbands and wives. Second, prior research on expectations has consisted of either global evaluations or of evaluations focused specifically on the division of labor, and in the present study, we examined expectations across multiple domains related to the transition to parenthood. Methodological limitations also exist in the present study. Although the modest sample size was offset by the multiple (7–11) waves of data, the sample size may have restricted the power to detect expected associations between predictor variables and parameters of marital satisfaction trajectories. The findings reported should be replicated with a larger sample. Further, we relied on self-report questionnaires, yielding the potential problem of shared method variance. Observational data on marital functioning would be important in future studies in this area.

The results of this study have several implications. First, our findings contribute to the growing body of literature suggesting that expectations are associated with marital satisfaction. Assessing prepregnancy satisfaction levels refined prediction of husbands’ and wives’ expectations, and expectations (regardless of whether they were confirmed or disconfirmed) refined prediction of postpartum marital decline. Perhaps more important, once sample and method heterogeneity were controlled, a variety of patterns of association between prenatal expectations and postnatal perceptions emerged. Whereas many spouses reported violations in their expectations (things were worse than expected), a nontrivial number of spouses reported that postnatal perceptions either met or surpassed their expectations. This group of couples has been relatively ignored in the literature to date, and future research with these couples may provide important information about marital resiliency across the transition to parenthood.

Clinically speaking, the vast majority of prenatal programs prioritize the physical aspects of labor and delivery and fail to incorporate discussions of the social and emotional changes and stressors that new parents often experience. Given the consistent finding that the transition to parenthood is associated with a decline in marital satisfaction, there is a great need for programs that address issues pertinent to new parents (see Cowan & Cowan, 1995, for a discussion), and researchers and clinicians have begun to develop such programs (e.g., Cowan & Cowan, 2000). In accord with these recent efforts, prenatal classes might be expanded to incorporate sessions focused on other aspects of becoming a parent, as well as encouraging communication between partners regarding their expectations of parenthood. Because a notable proportion of first-time parents do not attend pregnancy and childbirth classes, women’s prenatal health care offers a unique opportunity to educate women and their partners about the transition to parenthood. The nurse health visitor model currently in place in the United Kingdom provides an ideal example. Identified during pregnancy, women are matched with a “visitor” who remains in contact with the woman through pregnancy and into the postpartum period. All families with children under the age of 5 years are assigned health visitors who come to the home throughout the postpartum period and beyond, providing physical care, social support, education, and advice about child rearing (growth and development, safety, sleeping, and feeding issues). Incorporation of a cognitive intervention addressing expectations and their influence on postpartum marital satisfaction may serve to buffer the detrimental associations documented in the present study.

References


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