



Changes in Healthy Marriage Clients' Outcomes Over Time

The federal government has a long-standing commitment to supporting healthy relationships, stable families, and fathers' involvement in the lives of their children and families. Since 2005, Congress has funded \$150 million each year in healthy marriage (HM) and responsible fatherhood (RF) grants. The Office of Family Assistance (OFA) in the Administration for Children and Families (ACF), U.S. Department of Health and Human Services, has awarded and overseen three cohorts of these grants.

The desire for better relationships can be a powerful motivator for clients to enroll in and attend HM services. Clients of HM programs typically seek the services to improve their relationships with partners or children or enhance their economic stability (see Box 1 for a description of the services). This snapshot uses survey data collected by the 2015 cohort of HM grantees to describe changes in key outcomes for HM clients from the time they entered program services until their last workshop session. Outcomes include clients' self-reported perceptions, attitudes, and behaviors.

Box 1. What are HM program services?

HM grantees may use grant funds for eight activities: (1) public advertising campaigns; (2) education in high schools; (3) marriage and relationship education and skills, which may include job and career advancement; (4) premarital education; (5) marriage enhancement; (6) divorce reduction; (7) marriage mentoring; and (8) reduction of disincentives to marriage. The primary service that HM grantees provide is group-based workshops, which typically range from a few days to a few months. Under the 2015 funding opportunity announcement, grantees were also required to offer case management (unless they received an exemption from ACF), during which clients receive individualized attention and might receive referrals to other services.

Methods

Of the 45 HM grantees that received five-year grants from OFA in September 2015, 43 served adults. The data for this snapshot came from the adult clients served by those grantees. The clients completed up to three surveys as they progressed through the program: (1) an applicant characteristics survey when they enrolled;

(2) an entrance survey at the first workshop they attended; and (3) an exit survey, which they typically completed at the final workshop.

This snapshot covers program operations from July 2016 (the last quarter of the first grant year) through March 2019 (the first half of the fourth grant year). An interim report describes more findings, including client characteristics, the services grantees provided, and how HMRF clients changed from the beginning to the end of the program.¹ See Box 2 for practice tips on using the data reported here.

What populations did HM programs intend to serve and how many HM adult clients enrolled?

HM grantees enrolled more than 60,000 adult clients in nearly three years (Exhibit 1). HM grantees can serve one or two distinct adult client populations. The first is adult individuals—that is, clients who enrolled in an HM program without a partner, regardless of whether they were in a romantic relationship. Second are HM adult couples, who enrolled in an HM program with their romantic partner. HM programs for adult couples serve both partners.

Box 2. Practice tips

This snapshot describes how the outcomes of adult clients changed from the beginning to the end of the programs offered at 43 HM grantees. The information can deepen the field's understanding of the changes that adults experienced. However, the brief does not assess whether the programs themselves caused these changes.

When designing and improving program services, practitioners should consider the following:

- **Which outcomes is your program intended to affect?** Keeping in mind that this snapshot does not show program effects, did HM adult clients highlighted in this brief typically experience changes in those outcomes? Consider whether the kinds of [activities provided by these programs](#)² could help your clients change even more than they otherwise would without program services.
- **How much of a change would you expect during the program?** Change can take time, so consider how long your program will work with clients. The mean length of time from clients' first to last services was about 30 days for adult couples and more than 60 days for adult individuals.
- **What experiences do you want your HM clients to have in the program?** Please review the section on program perceptions for client satisfaction and clients' perceptions of how the program helped them improve their parenting, manage conflict, and handle finances.

Exhibit 1. Adult clients enrolled, by HM target population: July 1, 2016 through March 31, 2019



¹Avellar, Sarah, Alexandra Stanczyk, Nikki Aikens, Mathew Stange, and Grace Roemer. "The 2015 Cohort of Healthy Marriage and Responsible Fatherhood Grantees: Interim Report on Grantee Programs and Clients." OPRE Report 2020-67. Washington, DC: Office of Planning, Research and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services, 2020. Available at https://www.acf.hhs.gov/sites/default/files/documents/opre/interim_report_on_2015_hmrf_grantees_508.pdf.

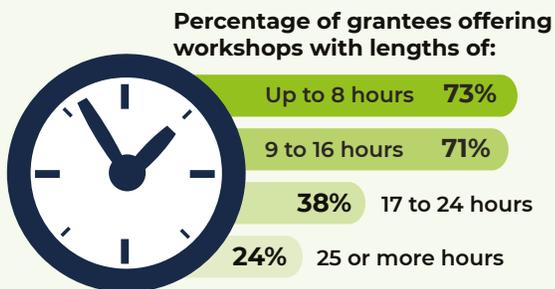
²For more information on HM services, see www.acf.hhs.gov/sites/default/files/documents/opre/Healthy_Marriage_2015_Services.pdf.

Understanding changes from the beginning to the end of the program

To learn how clients changed over the course of the program, we compared their answers on the surveys from the time they entered the program to their last workshop session (see box 3 for information on length of HM workshops). There are, however, several important caveats to these findings:

- The outcomes represent goals of the HM programs, but they do not necessarily represent the effects of the programs. That is, the programs did not necessarily cause the changes in clients' outcomes. An impact study is the only way to identify program effects.³
- We limited the analysis to clients who responded to both entrance and exit surveys. This group includes about 60 percent of HM adult clients

Box 3. Length of HM workshops



Average workshop hours: **13**

Average number of workshop sessions: **6**

who enrolled in the programs and completed an applicant characteristics survey. As a result, the group for which we analyze changes might differ from all adults enrolled in the program.

- We report statistically significant changes at the 0.05 level or less. Because of the large number of adult clients included in the analysis, some statistically significant changes are small or modest. Readers should consider the magnitude of changes when assessing their importance.⁴

Changes in relationships

Adult clients reported improvements in their relationships from the beginning to the end of a program. Adult clients (both individuals and couples) who were in a relationship at both program entry and exit reported improvement on multiple aspects of their relationships by program exit (Exhibit 2). They reported improvements in relationship companionship with their partner, such as talking to each other about the day and laughing together (Exhibit 2).⁵ They also reported improvements in the support they felt from their partner, such as counting on and feeling appreciated by their partner.⁶ By the end of the program, about half of these adult clients were very satisfied with the way they and their partner or spouse handled conflict. Clients were more likely than at the outset of the program to report being very satisfied with their relationship and to strongly agree that their relationship was lifelong.

³An impact study would include a comparison group of adults who did not receive HM services but were initially similar to those who did.

⁴We describe only changes in outcomes that were greater than 0.1. We do not describe changes at the one-hundredth level (such as an average score that changed from 3.81 to 3.82) that were statistically significant. However, all results are available in the interim report (Avellar et al. 2020).

⁵The relationship companionship summary score is the mean of clients' responses to three individual items: (1) In the past month, my partner/spouse and I have talked to each other about the day; (2) In the past month, my partner/spouse and I have laughed together; and (3) In the past month, my partner/spouse and I have participated together in an activity we both enjoy. For each item: 1 = strongly agree; 2 = agree; 3 = disagree; and 4 = strongly disagree. Items are reverse coded before scoring. Mean scores range from 1 to 4, with higher scores indicating greater relationship companionship.

⁶The relationship support summary score is the mean of clients' responses to the following five individual items: (1) I trust my partner/spouse completely; (2) My partner/spouse knows and understands me; (3) I can count on my partner/spouse to be there for me; (4) I feel appreciated by my partner/spouse; and (5) My partner/spouse expresses love and affection toward me. For each item: 1 = strongly agree; 2 = agree; 3 = disagree; and 4 = strongly disagree. Items are reverse coded before scoring. Mean scores range from 1 to 4, with higher scores indicating more relationship support.

Exhibit 2. Changes in HM adult clients' relationship quality

 Outcome	Adult individuals		Clients in adult couples	
	Entry (% unless otherwise noted)	Exit (% unless otherwise noted)	Entry (% unless otherwise noted)	Exit (% unless otherwise noted)
Mean relationship support summary score* (standard deviation)	3.34 (0.64)	3.43 (0.61)	3.27 (0.65)	3.43 (0.60)
Number of clients	7,528		17,165	
Mean relationship companionship summary score* (standard deviation)	3.34 (0.76)	3.40 (0.72)	3.37 (0.70)	3.50 (0.59)
Number of clients	6,858		16,197	
Satisfaction with the way my partner/spouse and I handle conflict***				
Very satisfied	45	55	32	51
Somewhat satisfied	43	37	48	39
Not at all satisfied	12	8	20	10
Number of clients	7,852		17,299	
Satisfaction with current relationship***				
Very satisfied	63	71	56	70
Somewhat satisfied	30	24	36	26
Not at all satisfied	6	4	8	4
Number of clients	7,185		16,690	
I view my marriage/relationship as lifelong***				
Strongly agree	60	65	66	73
Agree	32	28	29	22
Disagree	7	5	5	4
Strongly disagree	2	1	1	1
Number of clients	7,548		17,251	

Source: HM entrance and exit surveys, July 2016 through March 2019.

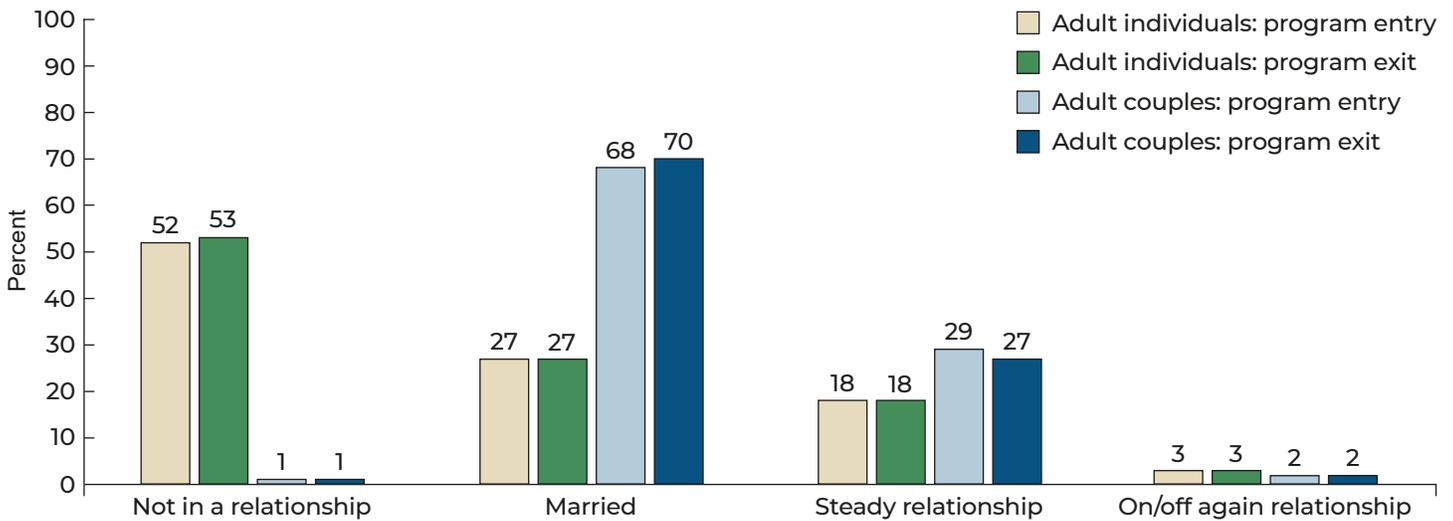
***Statistically significant change from program entry to exit within each population at the .001 level.

Most clients in adult couples were in a relationship at the beginning and end of the program, but individual adult clients were less likely to be in a relationship from the beginning to the end of a program. Sixty-eight percent of adult couples reported being married at program entry, compared with 70 percent at program exit, whereas the percentage of those in a steady relationship

decreased slightly (from 29 percent at program entry to 27 percent at program exit; Exhibit 3).

The percentage of adult individuals who reported they were not in a relationship increased from 52 percent to about 53 percent. The percentage married, in a steady relationship, or in an on-again off-again relationship did not change.

Exhibit 3. HM adult clients' relationship status



Source: HM entrance and exit surveys, July 2016 through March 2019.

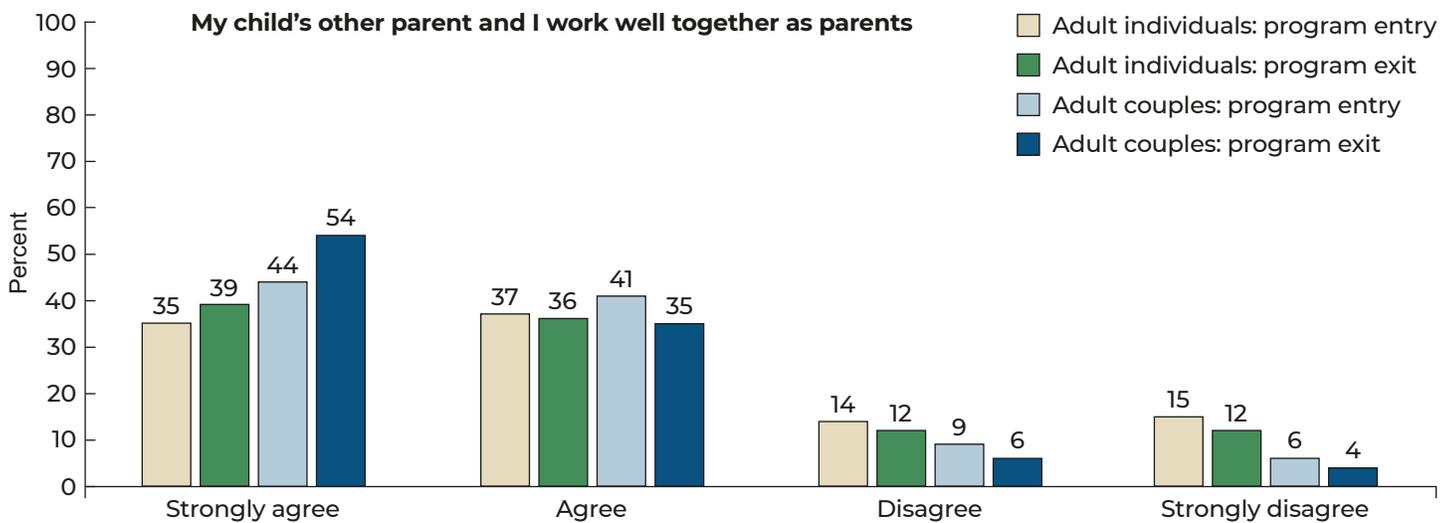
Note: For both adult individuals and adult couples, there was a statistically significant change in relationship status from program entry to exit at the .001 level. We tested the difference from entry to exit in the distribution of clients across relationship statuses (using a statistical test called chi-square). That is, we do not test differences for each relationship status and so do not include markers of statistical significance in the figure.

Changes in parenting and coparenting

Adult HM clients reported improvements in coparenting. Most adult HM clients thought they and their partner worked well together as parents

at program entry (72 percent of adult individuals and 85 percent of adult couples strongly agreed or agreed; Exhibit 4). This proportion increased by program exit (75 percent of adult individuals and 89 percent of adult couples).

Exhibit 4. Coparenting changes



Source: HM entrance and exit surveys, July 2016 through March 2019.

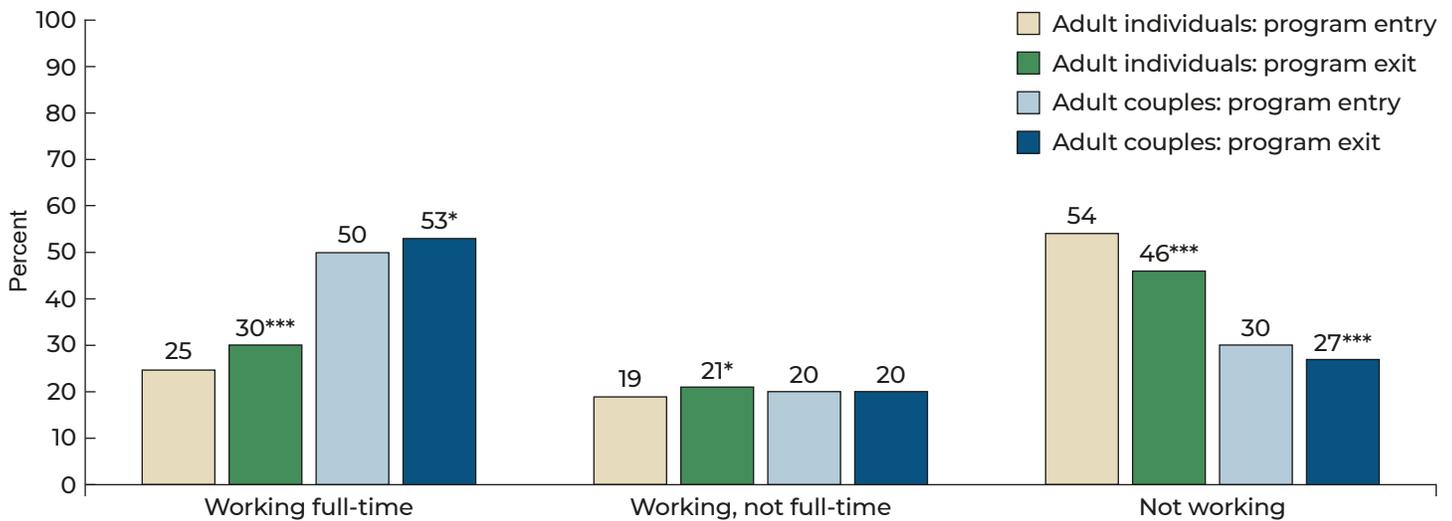
Notes: The question was asked only of clients who lived with at least one of their children (6,192 adult individuals and 10,158 clients in adult couples).

For both adult individuals and clients in adult couples, there was a statistically significant change in coparenting from program entry to exit at the .001 level. We tested the difference from entry to exit in the distribution of clients across categories (using a statistical test called chi-square). That is, we do not test differences for each category and so do not include markers of statistical significance in the figure.

Changes in economic stability

Adult clients reported increases in employment from the beginning to the end of a program. More clients in adult couples reported working at program exit compared to program entry (Exhibit 5).

Exhibit 5. HM clients' changes in employment



Source: HM entrance and exit surveys, July 2016 through March 2019.

*Statistically significant change in employment from program entrance to exit at the .05 level.

***Statistically significant change in employment from program entrance to exit at the .001 level.

Adult clients' confidence in their job skills improved. Adult HM clients answered questions about their confidence in their ability to get a job, such as whether they knew how to find openings and apply for a job, and about their confidence in their interviewing skills. On a scale of 1 (strongly disagree) to 4 (strongly agree), adult individuals' scores increased from 3.1 to 3.2, indicating they felt more confident in their ability to find and attain a job. Scores among clients in adult couples increased from 3.2 (program entry) to 3.3 (program exit).

Job barriers worsened from the beginning to the end of a program. Adults reported their experience with seven barriers that might interfere with their ability to get and keep a job, such as not having

reliable transportation, not having the right skills or education, or having a criminal record.⁷ The average number of barriers increased. Adult individuals reported an average of 2.9 barriers at program exit, a change from 2.6 at program entry. Clients in adult couples reported an average of 2.0 barriers at program exit compared with 1.7 at program entry.

Adult HM clients reported less difficulty paying bills from the beginning to the end of a program. For example, the percentage of adult individuals who said they never had difficulty paying bills increased from 26 percent (program entry) to 30 percent (program exit). Among clients in adult couples, the percentage who reported never having difficulty paying bills increased from 26 percent to 31 percent.

⁷The barriers were (1) does not have reliable transportation; (2) does not have right clothes (including uniforms); (3) does not have documentation for legal employment (e.g., birth certificate); (4) does not have good enough childcare or family help; (5) has a criminal record; (6) does not have the right skills or education; and (7) has substance use or mental health problems.

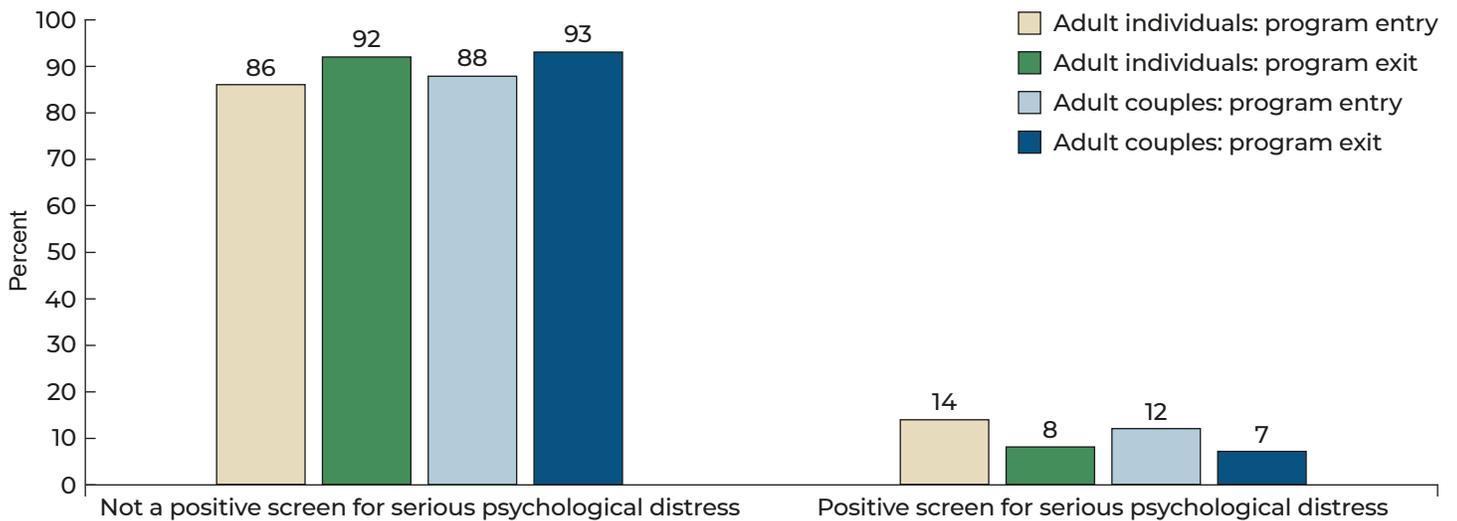
Changes in well-being

Adults reported less psychological distress from the beginning to the end of a program.

Adults answered questions about psychological distress, such as the frequency with which they had experienced feelings including being nervous, hopeless, restless, or worthless in the past 30 days.⁸ From program entry to exit, the percentage of adult HM

clients who screened positively for serious psychological distress declined. At program entry, 14 percent of adult individuals screened positively for serious psychological distress, which decreased to 8 percent by program exit (Exhibit 6). For clients in adult couples, 12 percent had a positive screen at program entry, compared with 7 percent at program exit.

Exhibit 6. Changes in HM adult clients' psychological distress



Source: HM entrance and exit surveys, July 2016 through March 2019.

Note: For both adult individuals and clients in adult couples, there was a statistically significant change in psychological stress from program entry to exit at the .001 level. We tested the difference from entry to exit in the distribution of clients across categories (using a statistical test called chi-square). That is, we do not test differences for each category and so do not include markers of statistical significance in the figure.

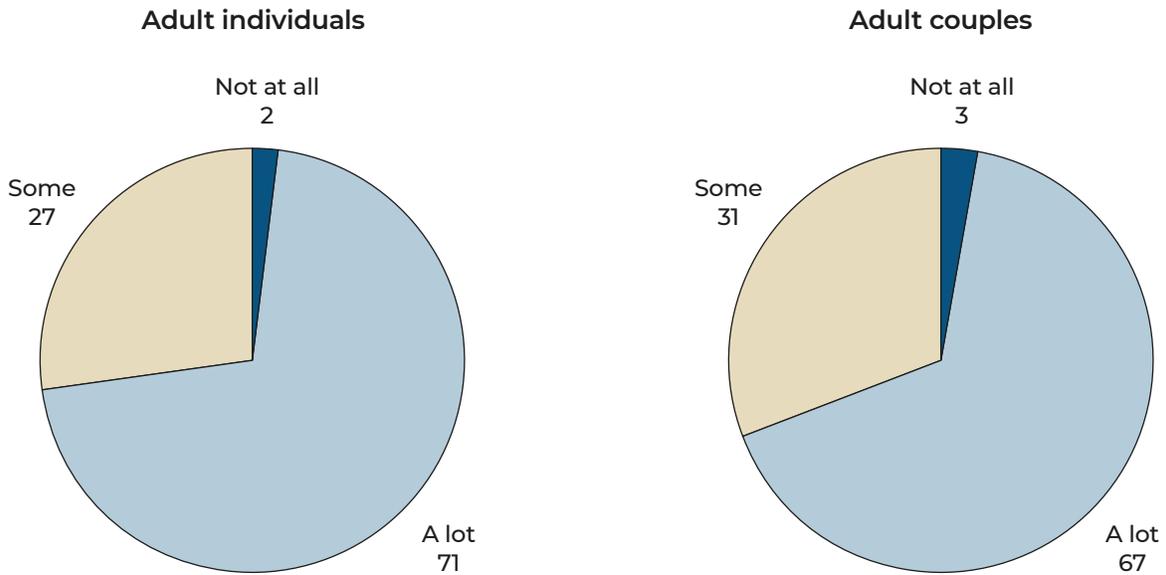
⁸Kessler, Ronald C., Peggy R. Barker, Lisa J. Colpe, Joan F. Epstein, Joseph C. Gfroerer, Eva Hiripi, Mary J. Howes, Sharon-Lise T. Normand, Ronald W. Manderscheid, Ellen E. Walters, and Alan M. Zaslavsky. "Screening for Serious Mental Illness in the General Population." *Archives of General Psychiatry*, vol. 60, no. 2, February 2003, pp. 184–189.

Program perceptions

Most HM clients believed the program helped them. Almost all clients reported the program helped them some or a lot (Exhibit 7). Moreover,

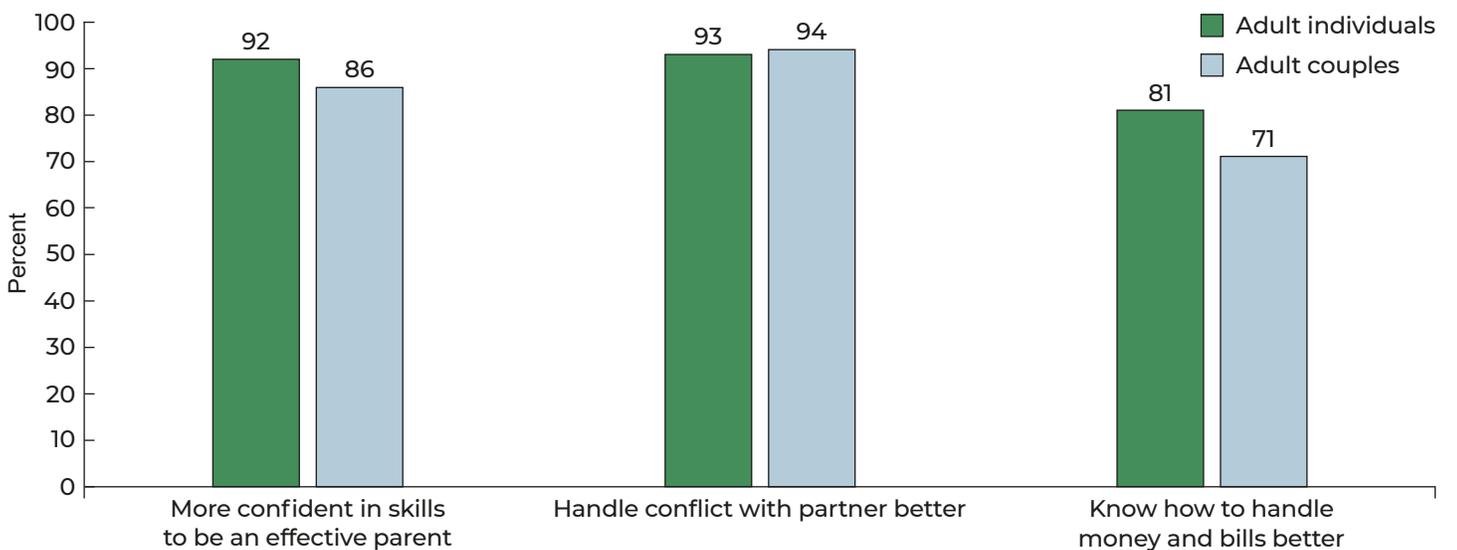
most adults reported that the program helped them become more effective parents, work better as a coparent, handle their bills better, and handle conflict better with their partner or spouse (Exhibit 8).

Exhibit 7. Adult HM clients' perception of how much the program has helped them



Source: HM exit surveys, July 2016 through March 2019.

Exhibit 8. HM adults' perceptions of improvements



Source: HM exit surveys, July 2016 through March 2019.

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