

# Reproductive Health Advocates And Marriage Promotion: Asserting a Stake in the Debate

By Cynthia Dailard

“Marriage promotion” represents a cornerstone of social conservatives’ domestic policy agenda, and proposals designed to promote and strengthen marriage are gaining currency at all levels of government. Since taking office, President Bush has promised to invest in marriage promotion on an unprecedented scale through his proposal to reauthorize the nation’s welfare reform law, and legislation pending before Congress would allocate substantial funding toward that end. Yet even as the president waits for Congress to act, his administration is finding ways to devote significant funding to marriage promotion activities through existing programs and funding streams.

The very question of government involvement in this area provokes strong reactions among players representing a wide range of interests and ideologies. The sexual and reproductive health community potentially has much to contribute to debates over policies and programs designed to promote or maintain the formation of intimate relationships that are healthy and stable—whether married or otherwise. To date, however, sexual and reproductive health advocates and practitioners largely have sat on the sidelines of this important social policy debate.

## The Politics of Marriage

The federal government first began promoting marriage as a matter of public policy through the 1996 welfare reform law. Based on the argument that the existing welfare system provided a disincentive to marriage and undermined the traditional fami-

ly structure by encouraging out-of-wedlock births among poor women, three of the four purposes of the 1996 law were designed to promote marriage. Notably, however, these marriage promotion goals permitted the states to spend their welfare block grant funds on marriage promotion activities targeting not only welfare recipients but all Americans.

Although conservatives applauded the 1996 law’s success in promoting “work over welfare,” many felt that it had failed to live up to its promise to promote marriage. Accordingly, President Bush, shortly after taking office, pledged to devote unprecedented attention and resources to marriage promotion activities. Since then, the House of Representatives twice passed welfare reauthorization proposals that would make good on the president’s promise, but the more moderate Senate’s attempts to move similar legislation fell apart over issues unrelated to marriage. Following the 2004 election, which broadened the conservative margin in Congress, both the House and Senate Republican leadership announced in January that Congress now would move swiftly to enact welfare legislation that would devote \$200 million per year for “healthy marriage promotion grants” as well as \$100 million per year for marriage-related research and demonstration projects.

The Bush administration, however, has not been idly awaiting congressional action on this front. According to various estimates, the administration during its first term tapped existing programs and funding streams to spend \$90–200 million for

dedicated marriage promotion activities and related research. Meanwhile, according to an April 2004 report by the Center for Law and Social Policy (CLASP), a growing number of states have begun to sponsor marriage promotion activities, such as premarital counseling, school-based marriage education, and education and support services to married couples; seven states already commit a significant portion of their federal welfare block grant funding to such types of activities.

## Ideology, Research & Reactions

For many social conservatives, promoting heterosexual marriage goes hand in hand with fierce opposition to the formal sanctioning of homosexual unions, in the name of “protecting” marriage. It also falls under the umbrella of a larger ideological and religiously motivated policy agenda that includes teaching young people that remaining abstinent outside of marriage is the expected standard of behavior and that supports channeling substantial funding to faith-based organizations to achieve these related policy goals.

For these social conservatives, little further justification for governmental marriage promotion may be necessary. The fact is, however, that they also can point to an established and growing body of research showing that marriage is good for individuals, particularly children. Married people are healthier, live longer and have higher earnings than single people. Children raised in married, two-parent families, moreover, are five times less likely to be poor than those raised by a single parent; they are also less likely to drop out of school or become a teen parent. Moreover, it would appear that it is not just the presence of two parents in the home that matters—children raised by their married, biological parents have better developmental outcomes than children who grow up with stepparents, and often with

unmarried, cohabiting parents. (It is also worth noting, however, that high-conflict marriages, and the stress and loss of parental income associated with divorce, can adversely affect both children and adults.)

At the same time, an array of progressive constituencies either express concern about the potential form that government efforts to promote marriage may take, or question the notion of governmental involvement in this area entirely. Common concerns include that such policies have the potential to denigrate women by reinforcing outdated gender roles; may harm victims of domestic violence by encouraging them to remain in abusive relationships; and may push teens and young adults prematurely into marriages that tend to be unstable and leave them at increased risk of poverty and reduced educational attainment when those relationships dissolve. For some, marriage promotion policies simply place government in the inappropriate position of promoting a particular moral or religious viewpoint—one that sanctions some forms of intimate relationships while denigrating others.

Some experts familiar with the literature related to marriage and child well-being recognize that the research in this area is incomplete, and acknowledge that there is no evidence that *public policies* to promote marriage will lift children out of poverty or improve child welfare. Additionally, they appreciate the harm that could accrue from marriage promotion efforts that are ill-conceived or too doctrinaire. These advocates are staking out a middle ground, by proposing a broader approach for government involvement than that embraced by the Bush administration. For example, under what CLASP has dubbed a “marriage-plus” perspective, government policies would help more children grow up with two biological parents in low-conflict marriages; when marriage is

not possible or desirable, government would help parents cooperate better in raising their children.

### A Stake in the Debate

Virtually absent from the public debate so far has been any serious consideration or even discussion of the potential interactions between relationship status and stability on the one hand and the sexual and reproductive health of individuals and couples on the other. To some extent, this may be due to the lack of an extensive body of research directly addressing these questions. Yet common sense and the research that does touch on this subject strongly suggest that relationship status and stability can affect sexual and reproductive health—and vice versa. The research demonstrates, moreover, that marriage, by itself, is not entirely protective against negative sexual and reproductive health outcomes that, in turn, can destabilize a couple’s relationship.

*Stable relationships foster better reproductive and sexual health outcomes.* There is no question that married people do better than single people in controlling their fertility and timing their pregnancies. Married women have lower levels of unintended pregnancy (which account for 31% of their pregnancies) than single women (75%). This is presumably due, at least in part, to their lower rates of contraceptive failure: During the first year of using a contraceptive method, 9% of married women experience a contraceptive failure resulting in an unintended pregnancy, compared with 14% of single, noncohabiting women. Moreover, 37% of unintended pregnancies among married women end in abortion, compared with 61% among single women. This makes sense, given that married couples are more likely to have the resources necessary to raise a child that had not been anticipated than single people (who may or may not have the emotional or financial support of a partner).

Existing research, however, fails to explain what it is about being married that makes people less likely to experience contraceptive failure and unintended pregnancy. Married people are more likely to be older than those who are not married. Married people also have less reason to be concerned about sexually transmitted infections (STIs), including HIV. All of this may influence a couple’s choice of a contraceptive method and their ability to use that method effectively. But does being married *in and of itself* offer some protection against these events, or do married people have different characteristics than unmarried people—such as maturity and dedication, or a more positive outlook for the future—that facilitate effective contraceptive use? These questions deserve further exploration.

*Reproductive health outcomes affect relationship stability.* While it certainly appears, at least on the surface, that the stability and security afforded by many marriages has a beneficial effect on people’s ability to control their fertility and to avoid adverse reproductive outcomes, common sense suggests that the reverse is true as well. Individuals and couples who have control over their fertility, and who successfully achieve their childbearing goals by having the number of children they want when they want them, are likely to enjoy greater stability both within and beyond marital relationships. Having children too early in a marriage or spaced too closely together, or raising a child that was not planned for, can place a great deal of stress on a couple’s relationship, as can a hasty marriage initiated in response to an unintended pregnancy. There can also be significant financial costs associated with raising a child that a couple did not plan for, and it is no secret that financial pressures can undermine relationships. And relationships can be pushed to the breaking point when couples do not agree on whether to have a child or terminate

an unintended pregnancy, or when they attribute blame for not being “careful enough” to avoid an unwanted pregnancy.

Moreover, research demonstrates that the ability of single people to control their fertility affects their prospects for establishing enduring relationships. Women who have a nonmarital birth are less likely to ever marry, and are more likely to divorce once they eventually marry, than women who do not experience such a birth. Because almost 60% of births to never-married women are unintended, Daniel Lichter, of Ohio State University, who conducted research on this issue, suggests that “marriage promotion might best begin with expanded efforts to reduce nonmarital childbearing.” Lichter further suggests that “policies that aim to reduce nonmarital childbearing in the first place may have the indirect benefit of increasing the incidence and stability of marriage.”

#### THE USES OF MARRIAGE PROMOTION DOLLARS

The “Healthy Marriage Promotion Grants,” as defined by both the House and Senate bills, would support any of the following activities:

- (1) Public advertising campaigns on the value of marriage and the skills needed to increase marital stability and health;
- (2) Education in high schools on the value of marriage, relationship skills, and budgeting;
- (3) Marriage education, marriage skills, and relationship skills programs, which may include parenting skills, financial management, conflict resolution, and job and career advancement, for non-married pregnant women and non-married expectant fathers;
- (4) Pre-marital education and marriage skills training for engaged couples and for couples or individuals interested in marriage;
- (5) Marriage enhancement and marriage skills training programs for married couples;
- (6) Divorce reduction programs that teach relationship skills;
- (7) Marriage mentoring programs, which use married couples as role models and mentors in at-risk communities; and
- (8) Programs to reduce the disincentives to marriage in means-tested aid programs, if offered in conjunction with any [of the other activities described].

*Marriage is not a panacea when it comes to reproductive and sexual health.* On a practical level, however, the fact remains that marriage, and the stability that it can bring, still fails to solve many of the problems that couples face in regard to controlling their fertility and timing their pregnancies (and that marriage is not even entirely protective against STIs). A 2003 AGI analysis shows that married people, like unmarried people, still experience considerable difficulty in avoiding unintended pregnancy and abortion, planning and spacing their births, and using contraception correctly and consistently over time (“Marriage Is No Immunity From Problems with Planning Pregnancies,” *TGR*, May 2003, page 10). Indeed, one million married women each year unexpectedly find themselves pregnant, with 420,000 of these pregnancies ending in abortion. Of those women who carry their pregnancies to term, two-thirds had hoped to wait longer before having their first child or next child; one-third had not intended to have a child at all, usually because they had already achieved their desired family size.

#### Taking a Seat at the Table

Certainly, more research needs to be done to further elucidate these important associations. Yet, given the apparent synergies between relationship status and sexual and reproductive health—and the fact that married people also experience negative outcomes that, in turn, can destabilize their relationship—it is clear that sexual and reproductive health professionals have much to contribute to the marriage promotion debate. Indeed, the list of marriage promotion activities that can be funded under the legislation currently pending before Congress speaks to many of the skills that sexual and reproductive health practitioners possess (see box). For example, family planning providers and sex educators have considerable expertise in bolstering people’s relationship and interpersonal skills, fostering com-

munication between couples, and helping them to negotiate conflict surrounding extremely sensitive issues such as personal intimacy and childbearing. They also understand that providing individuals and couples with the education, counseling and health care services they need to avoid unintended pregnancy and to lead sexually healthy lives free from disease, violence and sexual exploitation will provide them with the building blocks they need to form stable and long-lasting relationships.

For these reasons, sexual and reproductive health advocates have a legitimate claim to a seat at the table in future discussions about how to spend federal marriage promotion dollars, on the basis that counseling for married couples and couples contemplating marriage should include information about how to avoid unintended pregnancy. They are well-poised to argue, moreover, that family planning providers, with their long history of collaborating and partnering with a range of social service providers, have an important role to play in this effort. And since marriage is not a panacea in terms of helping couples avoid unintended pregnancy, they can also assert that family planning counseling and services that empower couples to take control over their reproductive lives and to avoid unintended pregnancy are central to efforts both to promote and to sustain healthy marriages.

The concerns being voiced about government involvement in marriage promotion, both in general and in specific, are real and legitimate. Yet, the fact remains that the federal government and the states are poised to invest substantial amounts of funding in this area. This presents a challenge, to be sure. But it also presents an opportunity for advocates and practitioners who are concerned about fostering both sexual and reproductive health, and healthy, stable couples and families, to make gains on both of these important fronts. ☉