The Marital Satisfaction Inventory, Revised (MSI-R), is a complete revision and restandardization of the Marital Satisfaction Inventory (MSI; Snyder, 1981). For over 15 years, the MSI has been an important tool for marriage and family therapists, pastoral counselors, and other mental health professionals who assist couples experiencing relationship distress. The revision encompasses substantial improvements to the instrument, including a new, substantially larger and more representative standardization sample; a reduction in the number of inventory items, so that administration is easier on examinees and less time-consuming; and the important addition of a scale assessing the individual’s concerns about aggression in the relationship.

Even with these improvements, it is important to note that the key features of the MSI have been retained. The original scales remain, and despite their having been shortened, they all continue to show good internal consistency and temporal reliability, with a strong correlation between the parallel scales in the MSI-R and the original instrument. Experienced MSI users will find the new instrument entirely familiar yet more informative, more convenient, and—through the new standardization—more broadly applicable to their practice.

**General Description**

The MSI-R is a self-report measure that identifies, separately for each partner in a relationship, the nature and extent of distress along several key dimensions of their relationship via their responses of “True” or “False” to each of the 150 MSI-R inventory items. The items are written at a 6th-grade reading level, and administration takes about 25 minutes. Each individual’s results can be scored and interpreted separately, or—preferably and more informatively—the results from both members of the couple can be displayed and interpreted both separately and in conjunction with one another.

Administration and scoring can be conducted with hand-scored paper-and-pencil materials or with either paper or online administration for computer scoring and interpretation. See the section entitled “Computer Services for the MSI-R” at the end of this Manual for more information about the requirements and options for obtaining computer-based test reports. Paper-and-pencil administration requires only the MSI-R AutoScore™ Form (WPS Product No. W-328A). Respondents mark their responses on the outer pages of the form, where the inventory items are presented. The inner pages of the form contain all the materials required for scoring results, obtaining scale scores, and displaying results in an informative profile.

**Purpose and Use**

The primary use of the MSI-R is in identifying the nature and extent of relationship distress with couples considering or beginning conjoint therapy. As a self-report measure, the MSI-R possesses unique features complementing the clinical interview, in that it presents a low-cost, low-effort method of gathering information across a broad range of relationship issues and permits sensitive information to be collected early; it also allows couples to convey information that partners are eager to communicate. When assessment findings are discussed with the couple in a collaborative process, results from the MSI-R can facilitate therapeutic rapport and the identification of treatment goals that are meaningful to the couple. As a multidimensional inventory, the MSI-R can serve as an objective measure of therapeutic gains and outcome throughout therapy and at termination, both in specific problem areas and in relevant domains not targeted by clinical interventions.

Various studies have also confirmed the usefulness of the MSI-R as a diagnostic tool with individuals and families for whom marital distress is not the primary complaint. For example, the MSI-R helps to identify relationship strengths and deficits that could potentially interact with such difficulties as depression, chronic pain or physical illness, and substance abuse disorders. The MSI-R has been used successfully to establish the relationship context underlying such specific concerns as sexual dysfunctions or financial problems. The MSI-R can also be useful in assessing the home environment of families in which emotional or behavioral difficulties of children or adolescents are of primary concern.

Additionally, the MSI-R has received considerable use as a multivariate criterion of marital functioning in research investigating the effectiveness of various treatment
methods, marital functioning across the family life cycle, and the linkage between relationship distress and physical, emotional, and occupational functioning.

A unique feature of the MSI-R is the ease with which it can provide useful interpretive feedback to the individual or couple. Communication of test results is facilitated by the face validity of scale content and by the graphic display of profile scores, which permits comparison of partners’ results to each other and to the results of couples from the general population. Group mean profiles for specific clinical populations presented in this Manual facilitate couples’ comparisons to these groups. In addition, shaded ranges of distress on the MSI-R Profile Form identify high, moderate, and low scores along each dimension. Finally, concise interpretive guidelines for each scale outlined in this Manual and in the computer-based MSI-R test report facilitate communication of findings to respondents and integration in treatment planning.

These features of the MSI-R have been described in various resources summarizing development of the MSI and its clinical and research applications (Snyder, 1982, 1983; Snyder, Cavell, Heffer, & Mangrum, 1995; Snyder & Costin, 1994; Snyder, Lachar, Freiman, & Hoover, 1991; Snyder, Lachar, & Wills, 1988; Wills & Snyder, 1982), as well as by multiple independent reviewers of the instrument. For example, earlier evaluations of the MSI have emphasized its systematic empirical development, by which it “stands in bold contrast” to other marital self-report inventories (Dixon, 1985), and which serves to distinguish it as “clearly the strongest marital satisfaction measure available in psychometric terms” (Fowers, 1990). Comparative reviews have identified the MSI as “the best available self-report instrument to broadly evaluate marital relationships” (Waring, 1985) and as “the most respected assessment instrument in the area” (Burnett, 1987). Other evaluations have emphasized the multidimensional features of the MSI, its usefulness “in working with couples who seem to be at a loss for where to begin in dealing with their issue” (Boen, 1988), and its particular advantage in facilitating clinical tasks of “highlighting couple strengths, working with these strengths to identify the limits of problem areas, and using the pattern of scores as an indicator for which services would be most appropriate” (Fowers, 1990). Previous reviews have also noted that the MSI’s relatively atheoretical underpinnings facilitate its use in a broad range of approaches to treating relationship distress—including therapists adopting cognitive-behavioral models (Eddy, Heyman, & Weiss, 1991; Margolin, 1983), and “professionals who view a relationship from a systems, intergenerational, or contextual theoretical perspective” (Bascue, 1985).

Scale Descriptions

The individual’s responses are scored on the 13 scales of the inventory, which include 2 validity scales (Inconsistency and Conventionalization), 1 global affective scale (Global Distress), and 10 additional scales measuring specific dimensions of relationship distress (see Table 1).

With the exception of Inconsistency, Conventionalization, and Role Orientation, all scales are scored in the direction of discontent so that high scores indicate high levels of dissatisfaction for a specific area within the relationship.

### Table 1

<table>
<thead>
<tr>
<th>Scale Description</th>
<th>Scale Abbreviation</th>
<th>Number of Items</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inconsistency</td>
<td>INC</td>
<td>20 (^a)</td>
</tr>
<tr>
<td>Conventionalization</td>
<td>CNV</td>
<td>10</td>
</tr>
<tr>
<td>Global Distress</td>
<td>GDS</td>
<td>22</td>
</tr>
<tr>
<td>Affective Communication</td>
<td>AFC</td>
<td>13</td>
</tr>
<tr>
<td>Problem-Solving Communication</td>
<td>PSC</td>
<td>19</td>
</tr>
<tr>
<td>Aggression</td>
<td>AGG</td>
<td>10</td>
</tr>
<tr>
<td>Time Together</td>
<td>TTO</td>
<td>10</td>
</tr>
<tr>
<td>Disagreement About Finances</td>
<td>FIN</td>
<td>11</td>
</tr>
<tr>
<td>Sexual Dissatisfaction</td>
<td>SEX</td>
<td>13</td>
</tr>
<tr>
<td>Role Orientation</td>
<td>ROR</td>
<td>12</td>
</tr>
<tr>
<td>Family History of Distress</td>
<td>FAM</td>
<td>9</td>
</tr>
<tr>
<td>Dissatisfaction With Children</td>
<td>DSC</td>
<td>11</td>
</tr>
<tr>
<td>Conflict Over Child Rearing</td>
<td>CCR</td>
<td>10</td>
</tr>
</tbody>
</table>

\(^a\)Number of item pairs.

The Inconsistency scale is a new validity scale based upon 20 pairs of items intended to assess the individual’s consistency in responding to item content. The two items that compose each pair are either (a) similar in content, so they should be answered in the same direction, or (b) dissimilar or nearly opposite in content, so they should be answered in opposite directions. High scores may indicate a random or careless approach to answering inventory items, confusion about item content or response directions, or deliberate noncompliance with the assessment process.

The Conventionalization scale assesses individuals’ tendencies to distort the appraisal of their relationship in a socially desirable direction. In general, the items that contribute to this scale reflect denial of minor, commonly occurring relationship difficulties, and describe the relationship in an unrealistically positive manner. Item content falls along three factors: complete satisfaction with partner qualities, total contentment with relationship interactions, and absolute harmony and understanding.

The Global Distress scale measures individuals’ overall dissatisfaction with the relationship. It is the best single indicator of global relationship affect and has been shown to be a reliable predictor of couples’ response to clinical interventions. Item content reflects global relationship distress, unfavorable comparison to other individuals’ relationships, and pessimism regarding the future of this relationship.
The Affective Communication scale evaluates individuals’ dissatisfaction with the amount of affection and understanding expressed by their partner. It is the best single measure of emotional intimacy experienced in the relationship. Item content aligns along two dimensions: lack of affection or support, and lack of understanding or mutual disclosure of feelings.

The Problem-Solving Communication scale assesses the couple’s general ineffectiveness in resolving differences. It measures overt discord rather than underlying feelings of estrangement. Item content reflects three domains: recurrent failure to resolve minor differences; lack of specific problem-solving skills; and overreactivity of the respondent’s partner, leading to inability to discuss sensitive issues.

The Aggression scale is a new scale measuring the level of intimidation and physical aggression experienced by the respondent from his or her partner. Items reflecting intimidation include the partner’s yelling when angry, slamming things, or throwing objects at the respondent. Items assessing physical aggression range from pushing or shoving to being physically injured by the partner.

The Time Together scale evaluates the couple’s companionship as expressed in time shared in leisure activity. Item content falls along two dimensions: lack of shared leisure activity, and lack of common interests.

The Disagreement About Finances scale measures relationship discord regarding the management of finances. Items fall along three factors: concerns regarding relationship finances, lack of confidence in the partner’s management of money, and arguments with the partner over finances.

The Sexual Dissatisfaction scale assesses dissatisfaction with the frequency and quality of intercourse and other sexual activity. Item content reflects three domains: general dissatisfaction with the sexual relationship, inadequate affection during sexual exchanges, and discontent regarding the partner’s apparent lack of interest or enthusiasm for sexual relations.

The Role Orientation scale evaluates the respondent’s advocacy for a traditional versus nontraditional orientation toward marital and parental gender roles. Items assess the division of household and child care responsibilities, equality of partners’ status and influence, and the relative importance of partners’ careers outside the home. In addition to evaluating partners’ views of marital and parental roles, potential for gender-role conflicts may be assessed by partners’ differences on this scale.

The Family History of Distress scale reflects the disruption of relationships within the respondent’s family of origin. Item content falls along three dimensions: an unhappy childhood, disrupted relationships among family members, and disruption in the parents’ marriage specifically.

The Dissatisfaction With Children scale assesses the relationship quality between respondents and their children, as well as parental concern regarding the emotional and behavioral well-being of one or more of the children. Items reflect four factors: concerns regarding children’s adjustment, disappointments in child rearing, lack of positive interaction with the children, and overt conflict with the children.

Finally, the Conflict Over Child Rearing scale evaluates the extent of conflict between partners regarding child rearing practices. Item content falls along three dimensions: the partner’s inadequate involvement in child rearing, relationship distress stemming from child rearing, and disagreement with the partner regarding discipline.

Because of the intuitive nature and face-valid content of its scales, the MSI-R can be used quite readily even by those clinicians not accustomed to dealing with psychometric data. The graphic display of profiles in objective fashion has strong basic appeal for both therapists and their clients. However, the ease with which the MSI-R can be mastered should not be allowed to mask the inventory’s firm empirical foundation and the need for the clinician to become familiar with the technical features of the instrument. Chapter 3 presents information regarding interpretation and clinical application of test results. The technical background on the scales is provided in chapter 5 (“Scale Development and Standardization”) and chapter 6 (“Psychometric Properties and Validation”).

**Summary of Research**

Over the past 15 years, a considerable body of research has been conducted in support of the reliability and validity of the Marital Satisfaction Inventory. Revision of the instrument involved detailed analyses of data from clinical as well as community samples in order to ensure retention of scale items contributing to the MSI’s usefulness in both clinical and research applications. Several alternative revisions of each scale were considered, and psychometric characteristics were compared. Items also underwent minor further refinements of specific wording, including a change in language from “spouse” and “marriage” to “partner” and “relationship,” to extend the MSI-R’s usefulness with nontraditional couples.

The final revised instrument comprising 150 items was standardized on a sample of 2,040 persons (1,020 intact couples). This sample was geographically diverse and had a balance that was consistent with the population of the U.S. census regions. The sample was also representative of the U.S. population for such demographic characteristics as ethnicity, educational level (SES), and occupation. Finally, the broad age range of the sample ensured representation of persons in their late teens through those in their 70s and beyond.

The MSI-R scales possess high levels of both internal consistency and temporal stability. Evidence for the validity of the MSI scales derives from previous studies of group discriminant validity, correlational studies of the scales’ convergent validity, and actuarial studies identifying the interpretive meaning of scores on each scale across distinct scale ranges. Reanalyses of earlier studies using new scoring criteria for the revised instrument extend major validity findings to the MSI-R.
For example, numerous studies of group discriminant validity have confirmed the MSI’s ability to distinguish between groups that, on the basis of theory or clinical experience, would be expected to differ on the MSI scales in some specific manner. These studies include comparisons of couples from the general community versus couples in marital therapy; pretreatment versus termination profiles for couples in marital therapy; couples in marital therapy versus couples seeking specialized assistance for financial distress or sexual dysfunctions; physically aggressive versus nonaggressive distressed couples; and couples in marital therapy versus couples in marital therapy versus adult psychiatric samples and parents of psychiatrically hospitalized children and adolescents.

Correlational studies of the MSI scales’ convergent validity have established the relatedness of these scales to a broad range of affective and behavioral components of marital interaction. For example, multiple validity studies have been conducted specifically to identify the interpretive meaning of each of the MSI scales assessing global relationship distress, couples’ communication, leisure time together, sexual interactions, distress regarding finances, concerns about child rearing, and attitudes toward marital and parental roles. Other studies have established the MSI’s ability to distinguish among subgroups of clinically distressed couples and to predict couples’ response to treatment. Each of these studies is presented in more detail in chapter 6 of this Manual.

In addition, several investigations have been conducted with both clinical samples and couples from the general community to assist in the actuarial interpretation of MSI scales. In each of these studies, partners were rated independently by a clinician or trained interviewer on a variety of criteria measuring emotional and behavioral characteristics of the individual and the relationship. Criteria relating to the MSI scales were further examined to determine their likelihood of being observed as a function of individuals’ scores on the MSI. From these studies, more than 1,200 scale correlates have been examined to identify low, moderate, and high scores on each scale and their interpretive meanings based on empirical findings. Analyses from these studies serve as the foundation for the interpretive guidelines presented in this Manual and for the computer-based MSI-R interpretive report.