

GENDER DIFFERENCES IN DYADIC ADJUSTMENT
(a multi-level analysis in a romanian adult sample)DIFERENȚE DE GEN ÎN ADAPTAREA DIADICĂ
(o analiză pe mai multe niveluri într-un eșantion de adulți din românia)

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<https://orcid.org/0009-0003-4936-4673>**Abstract**

This study examined gender differences in dyadic adjustment using a multi-level analytical approach in a community sample of Romanian adults (N = 116). The results showed that gender differences were not uniformly distributed across all relational dimensions. No significant differences were found for dyadic satisfaction, consensus, or cohesion. However, men reported higher levels of affective expression than women (M = 8.75 vs. M = 7.15), as well as higher total dyadic adjustment (M = 107.05 vs. M = 96.75). Distributional analyses indicated greater dispersion in women's scores, suggesting more heterogeneous relational experiences. Clinical classification based on the distress threshold revealed that women were significantly more likely than men to fall below the relationship distress cut-off (50.8% vs. 28.1%). The findings suggest that gender differences in dyadic adjustment become more visible when relational vulnerability and variability are examined, highlighting the value of a multi-level approach.

Keywords: dyadic adjustment, gender differences, marital satisfaction, relationship distress.

Rezumat

Acest studiu a examinat diferențele de gen în adaptarea diadică utilizând o abordare analitică pe mai multe niveluri într-un eșantion comunitar de adulți din România (N = 116). Rezultatele au arătat că diferențele de gen nu sunt distribuite uniform pe toate dimensiunile relaționale. Nu au fost identificate diferențe semnificative pentru satisfacția diadică, consensul sau coeziunea. Totuși, bărbații au raportat niveluri mai ridicate de expresivitate afectivă decât femeile (M = 8,75 vs. M = 7,15), și scoruri mai mari ale adaptării diadice totale (M = 107,05 vs. M = 96,75). Analizele de distribuție au indicat o dispersie mai mare a scorurilor femeilor, sugerând experiențe relaționale mai eterogene. Clasificarea clinică bazată pe pragul de stres relațional a arătat că femeile se situează semnificativ mai frecvent sub acest prag decât bărbații (50,8% vs. 28,1%). Rezultate sugerează că diferențele de gen în adaptarea diadică devin mai vizibile când sunt analizate vulnerabilitatea și variabilitatea relațională, evidențind valoarea unei analize pe mai multe niveluri.

Cuvinte-cheie: ajustare diadică, diferențe de gen, satisfacție maritală, suferință relațională.

Introduction Understanding the quality of intimate relationships represents a central concern in relationship research. Within this context, examining dyadic

adjustment provides an important framework for analyzing how partners evaluate their relationship. The construct refers to the degree to which partners perceive their

relationship as satisfying and characterized by consensus, cohesion, and affective expression [11].

In the decades since its conceptualization, the relevance of this construct has grown, as contemporary couple relationships are increasingly shaped by complex social and cultural transformations, including changing gender roles, evolving expectations regarding emotional intimacy, and shifting patterns of family organization. These transformations have intensified the need for research that examines how partners perceive and evaluate the quality of their relationships and how relational functioning varies across individuals and social contexts.

Despite the considerable number of studies investigating couple relationships, an important question remains insufficiently clarified: whether gender differences in dyadic adjustment are consistent across different relational dimensions and levels of analysis. Many empirical studies examine gender differences primarily through mean-level comparisons, which may overlook meaningful patterns related to variability or relational vulnerability. Consequently, analyses based solely on average scores may obscure important gender differences in dyadic functioning.

Previous empirical research has reported mixed findings regarding gender differences in dyadic adjustment and marital satisfaction. Meta-analytic evidence suggests that women tend to report slightly lower levels of marital satisfaction compared to men [4]. Similar patterns have also been reported in empirical studies, where men tend to report higher levels of marital satisfaction than women [7, 10]. These differences may become particularly visible during important life transitions such as parenthood [14].

One explanation for these inconsistencies lies in the multidimensional nature of dyadic adjustment. The construct of dyadic adjustment, originally conceptualized by Spanier, encompasses dyadic satisfac-

tion, consensus, cohesion, and affective expression [11]. Subsequent research has shown that these dimensions may contribute differently to global evaluations of relationship quality [1, 3]. Consequently, analyses that rely exclusively on total scores may obscure significant differences across relational dimensions.

Moreover, research on gender socialization suggests that women are typically encouraged to monitor relational quality and emotional climate more closely, whereas men may be socialized to provide more global or stability-oriented evaluations of relationship stability [2]. These differences in relational perception and evaluation may become particularly evident in dimensions related to emotional communication and affective expression.

Finally, cultural context may also influence the way gender differences in dyadic adjustment manifest. Much of the existing literature is based on Western European and North American samples, while Eastern European societies are less frequently examined. In countries such as Romania, traditional gender norms coexist with ongoing socio-cultural transformations, which may shape relational expectations and couple dynamics [9]. In Romania, prior research has provided valuable insights into marital adjustment by identifying significant predictors of relationship functioning [6].

Building on this important work, further research may benefit from complementing traditional mean-level comparisons with analyses that consider score variability and clinically meaningful thresholds of distress. Such an approach may provide a more comprehensive understanding of how gender differences manifest across various levels of relational functioning.

The aim of the study is to study gender differences in dyadic adaptation adjustment in a Romanian community sample, using a multi-level analytical approach that integrates mean comparisons,

variability analyses, and classification based on the clinical threshold for relationship distress. Such an approach enables a more detailed examination of relational functioning by capturing not only average evaluations but also patterns of dispersion and indicators of relational vulnerability.

Research methodology

Study hypotheses Based on the multidimensional nature of dyadic adjustment and previous findings regarding gender differences in relationship evaluations, the following hypotheses were formulated:

H1. Gender differences in dyadic adjustment are expected to be dimension-specific rather than uniformly distributed across all components of the construct.

H2. Men are expected to report higher levels of affective expression and total dyadic adjustment compared to women.

H3. Women's dyadic adjustment scores are anticipated to show greater dispersion compared to men's scores, as reflected in distributional indices.

H4. Women will be more likely than men to be classified below the clinical threshold for relationship distress ($DAS < 100$).

The study sample consisted of 116 participants from Romania who were in a marital dyad at the time of questionnaire completion. Of these, 59 were women (50.9%) and 57 were men (49.1%). Participants' ages ranged from 26 to 54 years, with a balanced gender distribution. Participants were recruited from the general population using a convenience sampling method, without clinical inclusion or exclusion criteria, as the aim of the study was to investigate dyadic adjustment in a community sample.

A post-hoc power analysis conducted using G*Power indicated that the sample size ($N = 116$; $n_1 = 59$, $n_2 = 57$) provided adequate statistical power ($1 - \beta = .84$) to detect a medium effect size ($d = 0.50$) at $\alpha = .05$.

Procedure Data were collected online using a Google Forms questionnaire. Participants took part in the study on a voluntary basis, and their responses were recorded anonymously. All participants gave informed consent before filling out the questionnaire, and the study complied with standard ethical guidelines for psychological research. Completion time was 15–20 minutes.

Instruments Dyadic adjustment was assessed using the Dyadic Adjustment Scale (DAS), a well-established instrument in couple relationship research. DAS measures four dimensions of relational functioning:

- **Dyadic satisfaction**, reflecting the perceived level of satisfaction and stability in the relationship.

- **Dyadic consensus**, assessing the extent to which partners agree on major life issues.

- **Dyadic cohesion**, reflecting shared involvement and joint activities.

- **Affective expression**, capturing manifestations of affection and emotional intimacy.

In addition to subscale scores, a total dyadic adjustment score was calculated and used as a global indicator of relationship quality. According to the literature, a total score below 100 indicates clinically significant relationship distress [12].

Analytical Strategy In addition to mean comparisons, effect sizes were calculated for all inferential analyses using coefficient r for Mann–Whitney U tests and Cohen's d for t tests. Dyadic adjustment was also examined from a clinical perspective by classifying participants based on the established DAS distress threshold.

Statistical analyses were conducted using SPSS version 20. The analytical strategy included several successive steps:

1. calculation of descriptive statistics for all variables, separately for women and men.

2. testing the normality assumption of score distributions (Shapiro–Wilk).
3. selection of parametric or non-parametric tests based on normality results.
4. calculation of effect sizes (Cohen’s d and r).
5. analysis of distributional variability (SD, IQR, skewness, kurtosis).
6. analysis of gender differences at the clinical level using the DAS distress threshold and the χ^2 test.

Results The results are presented in

successive stages, beginning with descriptive statistics, followed by inferential analyses of gender differences, distributional characteristics and clinical classifications.

Descriptive Statistics of Dyadic Adjustment Dimensions To obtain an initial overview of dyadic adjustment levels by gender, descriptive statistics (means and standard deviations) were calculated for each DAS dimension separately for women and men, as shown in Table 1.

Table 1

Descriptive Statistics for Dyadic Adjustment Dimensions by Gender

Variable	Gender	N	Mean	Std. Deviation
Dyadic Satisfaction	Female	59	30.51	8.39
	Male	57	33.09	8.59
Dyadic Consensus	Female	59	46.41	10.25
	Male	57	49.56	9.43
Dyadic Cohesion	Female	59	13.46	5.23
	Male	57	14.58	4.69
Affective Expression	Female	59	7.15	2.94
	Male	57	8.75	2.10
Total Dyadic Adjustment	Female	59	96.75	20.37
	Male	57	107.05	17.30

Note. Higher scores indicate higher levels of the respective dimension.

Descriptive analysis indicates that men reported higher mean scores than women across all dyadic adjustment dimensions. Differences are small for dyadic satisfaction, consensus and cohesion, but become more pronounced for affective expression and total dyadic adjustment.

Regarding variability, standard deviation values suggest considerable score dispersion, especially for total dyadic adjustment, indicating heterogeneous relational

experiences within the sample. These descriptive observations motivated further inferential analyses to determine whether the differences are statistically significant.

Normality of the score distributions was examined with the Shapiro–Wilk test to guide the selection of parametric or non-parametric statistical procedures. Table 2 presents the results of the Shapiro–Wilk normality tests for each variable by gender.

Table 2.

Shapiro–Wilk Test of Normality for Dyadic Adjustment Dimensions by Gender

Variable	Gender	W	p
Dyadic Satisfaction	Female	.965	.087
	Male	.934	.004
Dyadic Consensus	Female	.971	.172
	Male	.909	< .001



Dyadic Cohesion	Female	.961	.058
	Male	.973	.232
Affective Expression	Female	.948	.014
	Male	.940	.007
Total Dyadic Adjustment	Female	.966	.093
	Male	.976	.327

Note. Significant p-values indicate deviation from normality.

The Shapiro–Wilk test results indicate that the normality assumption was not uniformly met for all variables across both gender groups. Specifically, distributions for dyadic satisfaction, dyadic consensus, and affective expression showed significant deviations from normality in at least one group ($p < .05$). In contrast, dyadic co-

hesion and total dyadic adjustment did not significantly deviate from normality in either gender group. Based on these results, non-parametric tests (Mann–Whitney U) were used for variables with non-normal distributions, while independent-samples t tests were used for variables meeting the normality assumption.

Table 3.

Gender Differences Across Dyadic Adjustment Dimensions

DAS Dimension	Statistical Test	p-value	Effect Size	Interpretation
Dyadic Satisfaction	Mann–Whitney U ($Z = -1.69$)	.091	$r = .16$	Small
Dyadic Consensus	Mann–Whitney U ($Z = -1.84$)	.067	$r = .17$	Small
Dyadic Cohesion	$t(114) = -1.21$.227	$d = 0.22$	Small
Affective Expression	Mann–Whitney U ($Z = -2.91$)	.004	$r = .27$	Moderate
Total Dyadic Adjustment	$t(114) = -2.93$.004	$d = 0.55$	Moderate

Dyadic Satisfaction A Mann–Whitney U test was conducted to examine gender differences in dyadic satisfaction. The results indicate no statistically significant difference between women and men in dyadic satisfaction. Although men reported slightly higher mean scores, the difference did not reach statistical significance. The associated effect size ($r = .16$) indicates a small effect, suggesting limited gender differences in dyadic satisfaction within this sample.

Dyadic Consensus No statistically significant gender differences were observed for dyadic consensus. Although descriptive statistics suggest slightly higher consensus among men, the observed

difference is small ($r = .17$) and does not reach conventional levels of statistical significance.

Dyadic Cohesion An independent-samples t test was used to examine gender differences in dyadic cohesion. Results indicate no statistically significant differences between women and men in dyadic cohesion. The mean difference is small, and the effect size ($d = 0.22$) suggests a small effect, indicating comparable levels of shared involvement and joint activities across genders.

Affective Expression Gender differences in affective expression were examined using the Mann–Whitney U test. Results indicate a statistically significant

gender difference in affective expression, with men reporting higher levels than women. The associated effect size ($r = .27$) indicates a moderate effect, suggesting a modest but meaningful difference.

Total Dyadic Adjustment Gender differences in total dyadic adjustment were examined using an independent-samples t test. The analysis revealed a statistically significant gender difference in total dyadic adjustment, with men reporting higher scores. The effect size ($d = 0.55$) indicates

a moderate effect, suggesting a substantial difference in global relationship evaluation.

Taken together, these findings provide partial support for Hypothesis 1, indicating that gender differences are not uniformly distributed across all dimensions of dyadic adjustment but emerge selectively. Specifically, significant differences were observed in affective expression and total dyadic adjustment, thereby supporting Hypothesis 2.

Distributional Analysis

Table 4.

Distributional Characteristics of Dyadic Adjustment Dimensions by Gender

Variable	Gender	SD	IQR	Skewness	Kurtosis
Dyadic Satisfaction	Female	8.39	15	-0.10	-1.01
	Male	8.59	14	-0.96	1.31
Affective Expression	Female	2.94	4	-0.58	-0.30
	Male	2.10	3	-0.53	-0.34
Total Dyadic Adjustment	Female	20.37	38	-0.09	-0.88
	Male	17.30	24	-0.31	-0.34

Note. SD = standard deviation; IQR = interquartile range.

Distributional indices indicate greater dispersion in women's dyadic adjustment scores compared to men's scores, particularly for total adjustment. Women presented higher standard deviation and interquartile range values across several dimensions, most notably for total adjustment (SD = 20.37; IQR = 38), compared to men (SD = 17.30; IQR = 24). These distributional characteristics suggest greater

heterogeneity in women's dyadic adjustment scores. Descriptive variability indices are consistent with Hypothesis 3, indicating greater dispersion among women relative to men.

Clinical Analysis: Relationship Distress Participants were classified based on the clinical threshold for dyadic adjustment (DAS < 100).

Table 5.

Prevalence of Relationship Distress by Gender

Gender	Non-distressed n (%)	Distressed n (%)	Total
Female	29 (49.2%)	30 (50.8%)	59
Male	41 (71.9%)	16 (28.1%)	57
Total	70 (60.3%)	46 (39.7%)	116

Note. Relationship distress was defined as a total DAS score below 100.

The chi-square test indicated a significant association between gender and relationship distress status: $\chi^2(1) = 6.29, p = .012$. The results align with Hypothesis 4

and indicate that women were significantly more likely than men to fall below the clinical threshold for relationship distress. This finding reinforces the importance of

examining dyadic adjustment from a clinical perspective rather than relying solely on mean-level comparisons.

Discussion The present study examined four hypotheses regarding gender differences in dyadic adjustment using a multi-level analytical approach. Overall, the findings support the proposed hypotheses and highlight a differentiated pattern of gender effects.

Consistent with Hypothesis 1, gender differences were dimension-specific rather than uniformly distributed across all components of dyadic adjustment. While satisfaction, consensus and cohesion showed no significant differences, affective expression and total dyadic adjustment revealed significant disparities, with men reporting higher levels (supporting H2). These findings indicate that gender differences become more visible when affective or global evaluations are considered rather than specific relational components.

The significant difference observed in affective expression is particularly relevant considering the literature on gender differences in emotional expression. Research suggests that women and men differ not only in the frequency of emotional expression but also in how such behaviors are interpreted and reported in relational contexts [2, 5]. In this sense, higher scores reported by men may reflect not only affective behaviors per se but also a more globally positive evaluation of the relationship, consistent with a tendency to minimize or integrate relational difficulties into an overall favorable appraisal.

An important contribution of the present study lies in demonstrating that analyses based exclusively on mean comparisons may provide an incomplete picture of gender differences in dyadic adjustment. Although mean scores were comparable across several dimensions, distributional analyses and clinical classifications revealed differences that would not have been observable through simple mean comparisons.

In line with Hypothesis 3, distributional indices (SD and IQR) indicated greater dispersion in women's dyadic adjustment scores, particularly for total adjustment (SD = 20.37 vs. 17.30, IQR = 38 vs. 24). This heterogeneity suggests that women's relational experiences may be more polarized, encompassing both highly adjusted and distressed relationships.

Importantly, these distributional differences became even more evident when dyadic adjustment was examined from a clinical perspective. Specifically, a higher proportion of women than men were classified below the clinical threshold for relationship distress (50.8% vs. 28.1%), a finding consistent with Hypothesis 4. This pattern suggests that gender disparities are more pronounced at the level of relational vulnerability than at the level of average satisfaction - a crucial nuance that would have been lost in a simple comparison of means.

Gender Socialization and the Eastern European Context The present findings can be understood within the context of gender socialization processes and the socio-cultural characteristics of Eastern Europe [13]. In societies such as Romania, traditional gender norms continue to shape relational expectations, even amid ongoing social change [8]. Women are often socialized to invest more heavily in the emotional dimension of relationships, to monitor relational quality, and to assume greater responsibility for maintaining harmony within the couple. This heightened emotional involvement may lead to greater sensitivity to relational dysfunction, explaining both the increased score variability and the higher proportion of women classified below the clinical distress threshold.

At the same time, men may be socialized to minimize relational difficulties or to evaluate the relationship in a more globally positive manner, which may account

for higher reported scores in total dyadic adjustment. These differences do not necessarily reflect objectively different relationship quality but may instead indicate distinct styles of evaluating and reporting relational experiences.

Cross-cultural research also suggests that relationship evaluations vary across socio-cultural contexts and may be shaped by broader cultural norms and social structures [9, 10]. In this light, the patterns observed in the present study may reflect the specific socio-cultural characteristics of Eastern Europe, where traditional gender norms continue to influence relational expectations.

Clinical and Applied Implications

From a clinical perspective, the present findings have several important implications. First, they suggest that the assessment of dyadic adjustment should move beyond mean-level analyses and include indicators of variability and clinical thresholds. A couple may present a satisfactory average score while one partner—particularly the woman—experiences significant relational distress. Second, observed differences in affective expression underscore the need for couple interventions tailored to gender differences in emotional communication. Interventions aimed at improving emotional expression may have different effects on women and men depending on cultural norms and emotional socialization patterns. Third, the identification of a substantial proportion of women classified below the clinical threshold highlights the importance of early screening for relational distress,

even in community samples rather than exclusively in clinical settings.

Study Limitations The interpretation of these findings should consider several limitations. First, the study relied on self-report measures, which may introduce social desirability bias or gender-specific reporting styles. Second, although the sample was balanced in terms of gender, it is not nationally representative, and the generalization of these findings should be made with caution. Finally, given the cross-sectional design of the study, conclusions about causal links between gender and dyadic adjustment should be viewed as tentative.

Conclusions The study confirms that gender differences in dyadic adjustment are dimension-specific (H1) and particularly evident in affective expression and global evaluations of the relationship (H2). This pattern highlights the complex nature of gender-related dynamics within intimate relationships. Furthermore, greater variability and a higher prevalence of clinically significant distress among women (H3, H4) suggest that gender disparities become more salient when relational vulnerability is examined beyond mean-level comparisons. More broadly, the study highlights the importance of complementing traditional mean-level analyses with distributional and clinical approaches when examining relational functioning. Such an approach may provide a more sensitive framework for identifying gender-related patterns of relational vulnerability in community samples.

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