



RESEARCH ARTICLE

Development of Marital Happiness Scale

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ABSTRACT

This study presents the Marital Happiness Scale (MHS), a tool designed to assess the degree of happiness associated with various aspects of marriage among married individuals. The validity of the MHS was tested using three methods: exploratory factor analysis (EFA), confirmatory factor analysis (CFA), and criterion validity testing. EFA was conducted on data from 420 married individuals, CFA on data from 221 participants, and criterion validity was examined using data from 272 individuals. EFA results indicated that the MHS comprises two factors, namely Emotional Intimacy and Marital Commitment, which together explained 70% of the total variance. CFA confirmed the construct validity of the two-factor model. The criterion validity of the MHS was assessed by examining the correlation coefficients between the MHS and the Spouse Support Scale (SSS) and the Couple Burnout Scale-Short Version (CBMS). The MHS demonstrated a significant and positive correlation with the SSS at a high level and a significant but negative correlation with the CBMS at a moderate level. The reliability of the MHS was tested using three methods: Cronbach's alpha (α), McDonald's omega (ω), and test-retest reliability coefficients. For the MHS, Cronbach's α and McDonald's ω were both .97, and the test-retest reliability coefficient was $r = .85$. The results indicate that the MHS is a valid, reliable, and useful instrument for measuring happiness in married individuals.

Introduction

Interpersonal relationships are a major determinant of the social and psychological well-being of an individual. Individuals allocate a considerable portion of their time to those within their close social circle, from whom they receive support during challenging periods, develop trust, and share positive experiences (Çağ, 2016; Givertz et al., 2013). Marriage, widely regarded as one of the most significant interpersonal relationships in life, is one of the closest and most enduring forms of relationship. Marriage is an important factor in promoting an individual's health and increasing life satisfaction, and it is considered a fundamental social institution in almost all cultures (Çağ & Yıldırım, 2013; Zhang & Hayward, 2006).

The capacity to establish and sustain high-quality marital relationships plays a critical role in the social, emotional, and psychological adjustment of an individual throughout their lives (Givertz et al., 2013). In a successful marital relationship, couples support each other's development, and their communication is open, egalitarian, and mutually supportive (Gladding, 2020). Several terms are used to describe marital functioning and reflect how well a marriage works. Examples include marital quality, marital happiness, marital

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satisfaction, and marital adjustment; however, the literature on these concepts is often challenging to distinguish. The terms "marital happiness," "marital adjustment," and "marital satisfaction" are used interchangeably with or sometimes in phase of "marital quality" (Erbek et al., 2005; Fincham & Rogge, 2010; Fincham, 1998; Gürel & Çopur, 2020; Spanier, 1979). Conversely, some researchers argue that the term "marital quality" is a general concept that encompasses concepts such as marital happiness, marital adjustment, and marital satisfaction (Amato & Booth, 1995; Erbek et al., 2005; Johnson et al., 1986; Kamp-Dush et al., 2008).

Marital happiness, an important component of marital quality, is defined as individuals' subjective happiness with various dimensions of their marriage and is strongly related to overall relationship satisfaction and well-being (Amato et al., 2007; Corra et al., 2009; Johnson et al., 1986; Kamp-Dush et al., 2008). It has a considerable influence on numerous facets of a marital relationship and contributes to its functioning, success, and overall quality. For instance, marital happiness is associated with other indicators of marital quality, such as divorce proneness, marital conflict, marital problems, and marital interaction (Amato et al., 2007). While factors such as intimacy, commitment, support, and harmony between spouses determine the quality of the marital relationship, these same interactions also contribute to the level of marital happiness (Cutrona, 1996; Rauer & Volling, 2013).

Marital relationships affect numerous aspects of an individual's life. Research indicates that married individuals demonstrate enhanced physiological and psychological well-being compared to unmarried individuals. However, those who are unhappy in their marital relationships demonstrate lower physiological and psychological well-being than those who are happy in their marital relationships (Coyne & DeLongis, 1986; Gottman & Silver, 2019; Kamp-Dush et al., 2008; Lawrence et al., 2019; Proulx & Synder-Rivas, 2013). A happy marriage contributes to overall life satisfaction and positively influences emotional and physical health. Conversely, an unhappy marriage has detrimental effects on the mental and physical health of spouses (Eskin, 2012). According to Gottman and Silver (2019), people in unhappy marriages experience physiological and psychological stress, which may lead to several mental and physical health problems, including high blood pressure, heart disease, depression, anxiety, and even suicide. Furthermore, unhappy marriages have been identified as a risk factor not only for spouses but also for children within the marital relationship (Birditt et al., 2012; Eskin, 2012; Gottman & Silver, 2019; Huang et al., 2024). Waite et al. (2009) demonstrated that an unhappy marital relationship is a risk factor for individuals' general happiness and well-being in life, irrespective of whether or not divorce occurs. The authors also noted that more than three-quarters of people who are both unhappy and happy in their marriages continue to remain so. Considering this, further research is needed to understand the concept of marital happiness, which is related to the well-being, health, and overall happiness of an individual.

When examining the studies conducted in Turkey on measuring the concept of marital happiness, it can be observed that the Relationship Happiness Questionnaire, developed by Fletcher et al. (1990) and adapted to Turkish culture by Tutarel-Kışlak (2002), is widely used (Demiral, 2020; Dilmaç et al., 2021; Keskin & Nacar, 2023; Koyuncu, 2023). However, the scale was originally developed to measure happiness in the context of premarital relationships and was later adapted for married individuals in the Turkish culture. Therefore, it has certain limitations in measuring marital happiness among married couples. Additionally, it is essential to note that the concept of marital happiness may be influenced by cultural factors, and scales developed in other cultures may be limited in identifying culture-specific dimensions. Cultural factors shape couple relationships and guide their behaviors and attitudes (Yıldız-Önal & Uçar, 2023).

In Turkish culture, individuals display characteristics of both individualistic and collectivist cultures; this is explained by the concept of the autonomous-relational self, which enables individuals to maintain their autonomy while simultaneously sustaining emotional interdependence with others (İmamoğlu, 1998; Kağıtçıbaşı, 2022). Therefore, in Turkey, marital happiness can be regarded as a construct that integrates both individual needs and collective values, shaped by the balance between autonomy and mutual interdependence. Additionally, marriage is perceived not only as the union of two individuals but also as the joining of two families in Turkish culture (Kılıçaraslan & Şahan 2021). This perception makes the approval and support of the extended family key determinants of marital happiness. Furthermore, cultural norms, such as the influence

of traditional gender roles, preservation of family values, and expectation of having children, play an important role in shaping individuals' perceptions of marital happiness.

A comparative study conducted in Turkey and the Netherlands by Celenk and van de Vijver (2013) found that Turkish participants emphasized 'children and economic factors in marital satisfaction more than Dutch participants. This finding can be interpreted as an indication that a family-oriented perspective is more prominent in marital happiness in Turkish culture. Consequently, these culture-specific characteristics in Turkish society may enhance marital happiness in terms of commitment, sacrifice, and devotion, while also creating restrictive effects in areas such as managing relationships with the extended family, maintaining rigid gender roles, and the unequal distribution of responsibilities (İmamoğlu, 1998; Kağıtçıbaşı, 2022; Kılıçarslan & Şahan, 2021; Topkaya et al., 2024). Therefore, developing a scale to measure marital happiness in Turkey would make a meaningful contribution to both research and clinical practice.

It is also observed that different measurement tools are used to measure similar concepts such as marital satisfaction and marital adjustment (Akçabozan-Kayabol et al., 2023; Çelik & Yazgan-İnanç, 2009; Fıfıloğlu & Demir, 2000). Due to the confusion surrounding the definition of concepts such as marital happiness, marital quality, satisfaction, and adjustment, there is still no consensus in the literature on the definition and measurement of these concepts (Civan, 2011; Glenn, 1998; Gürel, 2016). Although these scales have made significant contributions to the assessment of marital relationships, they do not directly measure the concept of marital happiness. The literature emphasizes that the concepts of satisfaction, adjustment, and happiness have different meanings. While marital satisfaction refers to the overall level of satisfaction individuals derive from their marriage (Spanier & Lewis, 1980), marital adjustment focuses on the extent to which spouses exhibit congruence in their ideas, emotions, and behaviors (Fıfıloğlu & Demir, 2000). Nevertheless, marital happiness is defined as the subjective evaluation of individuals' degree of happiness regarding various dimensions of their marriage (Corra et al., 2009; Johnson et al., 1986; Kamp-Dush et al., 2008), and it does not solely include marital satisfaction or the harmony and functionality between spouses. Moreover, marital happiness emphasizes the profound emotional experience that emerges when a bond between spouses is built on love, respect, and trust through mutual understanding, empathy, and support. This experience enables spouses to feel a sense of meaning, closeness, commitment, and well-being in their individual and shared lives. Indeed, happy marriages are made possible through the systematic development of a friendship-based relationship and emotional bonds (Gottman & Silver, 2019). Therefore, in this study, the concept of marital happiness was conceptualized to allow individuals to evaluate their subjective experiences regarding their marriages. This study aimed to develop a valid and reliable Marital Happiness Scale (MHS) based on existing literature.

Method

This section provides information about the focus group discussion, the study group, data collection tools, procedures, and data analysis.

Focus Group Discussion

To develop the MHS, a focus group discussion was conducted to explore the concept of marital happiness from the perspective of married individuals. Purposive sampling was used to form the study group. The inclusion criteria were as follows: (1) being married for at least 1 year; (2) being 19 years of age or older; and (3) agreeing to participate in the study voluntarily. In selecting participants, attention was paid to including individuals from different age groups, marriage durations, and parental statuses, with the aim of reflecting diverse perspectives in the focus group discussions. The study group comprised 16 married individuals (5 men and 11 women), with ages ranging from 27 to 55 years and marital durations ranging from 1 to 28 years. Eight participants in the study group reported being childless, five participants reported having one child, and three participants reported having two children.

The interviews were conducted in four sessions, each beginning with an explanation of the study purpose and information about the focus group discussion. The following five questions were posed to the group, and the participants exchanged views on them: (1) "What does marital happiness mean to you?"; (2) "What are the indicators of a marriage progressing happily?"; (3) "In your opinion, what are the obstacles to being happy in a marital relationship?"; (4) "Why do you think people cannot achieve happiness in their marriages?"; and (5)

“What additional points would you like to emphasize regarding a happy, healthy, and high-quality marriage?” With the consent of the participants, each session was audio-recorded and transcribed by the researchers at the end of each session. In addition to the theoretical knowledge from the literature on marital happiness, the opinions of the married individuals who participated in the focus group discussions were used to prepare the MHS items.

Study Group

Data were collected from three groups to develop the MHS. The inclusion criteria for all groups were as follows: (1) being married for at least 6 months, (2) being 19 years of age or older, and (3) providing voluntary agreement to participate in the study. The exclusion criteria were as follows: (1) not being married; (2) having been married for less than six months; and (3) being under 19 years of age. Participants from all study groups were recruited using convenience sampling. The online survey link was distributed via social media platforms, e-mail lists, and professional networks. The participants were informed about the study and invited to participate voluntarily.

The first study group comprised 420 married individuals (160 men and 260 women) selected using convenience sampling for exploratory factor analysis (EFA) of the MHS. In this group, the participants' age ranged from 21 to 70 years ($M_{age} = 36.45$; standard deviation [SD] = 8.24), and the marital duration ranged from 6 months to 40 years ($M_{MD} = 9.70$; SD = 8.7). The second group comprised 221 married individuals (78 men and 143 women) selected based on convenience sampling for the confirmatory factor analyses of the MHS. In this group, the participants' age ranged from 24 to 60 years ($M_{age} = 37.99$; SD = 7.38), and the marital duration ranged from 6 months to 38 years ($M_{MD} = 11.05$; SD = 8.71). The third study group comprised 272 married individuals (60 men and 212 women) selected based on convenience sampling for the analyses related to the criterion validity of the MHS. In this group, the participants' age ranged from 21 to 66 years ($M_{age} = 36.58$; SD = 8.32), and their marital duration ranged from six months to 39 years ($M_{MD} = 10.04$; SD = 8.97).

Measures

In this study, the data were collected using Spouse Support Scale (SSS), Couple Burnout Scale-Short Version (CBMS), and Personal Information Form (PIF) in addition to the Marital Happiness Scale (MHS).

Spouse Support Scale (SSS)

This scale, developed by Yıldırım (2004), is a three-point Likert scale comprising 27 items. The validity of SSS was examined by EFA and criterion validity. The EFA results indicate that the scale showed a four-factor construct, explaining 58.40% of the total variance. SSS was applied together with Beck Depression Inventory (BDI) to assess its criterion validity, and a significant negative correlation was observed between SSS and BDI. Additionally, the reliability of SSS was assessed by examining the internal consistency and the test-retest reliability coefficients. The internal consistency and test-retest reliability coefficients were found to be .95, and .89, respectively. The internal consistency coefficient regarding SSS was calculated to be .97 for the data collected in this study.

Couple Burnout Scale-Short Version (CBMS)

This scale, developed by Pines and colleagues (2011) and adapted to Turkish culture by Çapri (2013), is a seven-point Likert scale comprising 10 items. The validity of CBMS was tested by EFA and criterion validity. The EFA results demonstrated a single-factor construct, explaining 55.62% of the total variance. CBMS was applied together with Maslach Burnout Inventory (MBI) to test its criterion validity, and significant correlations were observed between CBMS and MBI subscales. Additionally, CBMS's internal consistency coefficient was found to be .95 for men and .94 for women. It was calculated to be .95 for the data collected in this study.

Personal Information Form (PIF)

The researchers developed this form to collect information on participants' socio-demographic characteristics, and it was administered together with the MHS.

Procedure

To develop the MHS, the literature on the concept of marital happiness was first reviewed and focus group discussions were conducted. In addition to these steps, the scale structure and response format of the MHS were also evaluated. Based on the theoretical information in the literature on marital happiness and the opinions of married individuals participating in the focus groups, an item pool of 118 items was generated. These items were examined for clarity, comprehensibility, and relevance to the concepts being measured. The authors first independently evaluated the items and then discussed them in detail. Following consensus, a form was created by selecting 60 items that were judged to best reflect the concept of “marital happiness”. Three academicians in the field of psychological counseling and guidance were consulted to assess the content validity of the 60-item form.

The experts evaluated these items according to the criteria of clarity, overlap, and relevance to the concept of marital happiness. Additionally, contributions from experts regarding potential new item suggestions were sought; however, no such suggestions were made. As a result of the feedback received, five items were dropped from the MHS, and three items were rewritten to render them more comprehensible. Therefore, the MHS trial form comprised 55 items. This form was administered to 25 married individuals (eight men and 17 women), and after their feedback, it was prepared for implementation. Due to these procedures, the MHS was developed as a 55-item, five-point Likert scale (“Not at all suitable for me,” “Not suitable for me,” “Partially suitable for me,” “Suitable for me,” and “Completely suitable for me”) and included 11 reverse items. Before data collection, ethical approval (dated 05.10.2022 and numbered E51944218-399-00002438381) was obtained from the Hacettepe University Ethics Commission. The data of 420 participants were analyzed using EFA. Confirmatory factor analysis (CFA) was conducted on the data obtained from 221 married individuals to confirm the construct validity of the two-factor, 22-item scale that emerged from the EFA.

Data Analysis

The data were analyzed using the SPSS 21 and AMOS 21 software. First, EFA and CFA were conducted to examine the construct validity of the MHS. The correlation coefficients between the MHS and SSS and CBMS were examined using Spearman's correlation coefficient to test criterion validity. The suitability of the data for EFA was tested prior to conducting the analysis. The Kaiser-Meyer-Olkin (KMO) sampling adequacy measure was .976, and the Bartlett sphericity test was significant. Accordingly, the data were suitable for EFA. Principal component analysis with varimax rotation was then conducted. The criterion that the items have a loading value greater than .45 on the first factor was used for the EFA (Büyüköztürk, 2017; Costello & Osborne, 2005). To confirm the validity of the structure that emerged as a result of the EFA, CFA was conducted on another data set using maximum likelihood estimation. The reliability of the MHS was assessed by examining Cronbach's alpha (α) and McDonald's omega (ω) coefficients for internal consistency, and the test-retest reliability coefficient for stability.

Results

This section addresses the validity and reliability analyses of the MHS, which was designed to measure marital happiness across two dimensions: emotional intimacy (EI) and marital commitment (MC).

Validity Studies

First, expert opinions were obtained to test the content validity of the MHS, and necessary adjustments were made according to the feedback. Second, EFA and CFA were conducted to examine the construct validity of the MHS. Finally, the correlation coefficients between the MHS and SSS and CBMS were examined to test the criterion validity.

Findings Related to EFA

The study group in which the EFA was conducted consisted of 420 married individuals. The suitability of the data for EFA was assessed by examining the KMO sampling adequacy measure and Bartlett's sphericity test results. The KMO sampling adequacy measure was .976, and Bartlett's sphericity test was significant ($\chi^2 = 8891.41$; $p < 0.001$). Therefore, the 55 items were suitable for EFA, and EFA was performed using PCA. The following criteria were used in the analysis: items with a loading value greater than .45 on the first factor

(Büyüköztürk, 2017; Costello & Osborne, 2005), a difference of at least .10 between the loading values of items on more than one factor (Büyüköztürk, 2017), and at least three items on each factor (Costello & Osborne, 2005). As a result of the EFA, 33 items that failed to meet these criteria were removed sequentially, and the analysis was repeated. As a result of the analyses, the MHS demonstrated a two-factor construct, explaining 70.21% of the total variance. Table 1 presents the factors that emerged from the EFA, along with the common factor variance, rotated factor matrix, eigenvalues, and explained variance values.

The EFA results indicated that the first and second factors each comprised 11 items. By examining the contents of the items forming these factors, the first and second factors were named “Emotional Intimacy (EI)” and “Marital Commitment (MC),” respectively. The sum of the scores obtained from these factors can be used as a general measure of marital happiness. Accordingly, the MHS yields a score between 22 and 110. Higher scores reflect higher levels of marital happiness, whereas lower scores indicate lower levels of marital happiness. CFA was conducted on another dataset to confirm the construct validity of the two-factor, 22-item scale that emerged from the EFA.

Table 1. Common factor variance and rotated factor matrix for MHS

Items	Common Factor Variance	Items	Factor 1	Factor 2
M4	,639	M31	,823	
M10	,456	M28	,803	
M15	,695	M41	,780	
M21	,757	M49	,769	
M22	,768	M43	,760	
M23	,681	M4	,760	
M25	,688	M21	,756	
M26	,801	M50	,724	
M27	,575	M22	,721	
M28	,837	M53	,681	
M29	,583	M10	,663	
M31	,773	M40		,766
M34	,753	M29		,752
M36	,720	M25		,738
M40	,690	M15		,732
M41	,699	M34		,731
M43	,805	M47		,721
M46	,740	M26		,715
M47	,554	M23		,700
M49	,804	M36		,683
M50	,761	M46		,670
M53	,666	M27		,653
Eigenvalue			13,95	1,49
Explained Variance			%63,41	%6,80
Total Variance Explained				%70,21

Findings Related to CFA

To verify construct validity, the two-factor construct was tested using CFA with AMOS software (version 21). The study group for the MHS model test comprised 221 married participants. The model tested the hypothesis that the MHS has a two-factor structure, with 11 items included in the EI factor and 11 items included in the MC factor. The model fit indices were evaluated according to the commonly accepted cut-off criteria listed in Table 2. The model goodness-of-fit indices, as determined by CFA prior to any modification, were as follows: $\chi^2/df = 2.212$; CFI = .943; NFI = .902; GFI = .839; AGFI = .804; RMSEA = .074; and SRMR = .043. After examining the suggested modification indices to improve the model, it was determined that the covariances between the error terms of items 10 and 21, items 22 and 50, and items 25 and 36 significantly affected the model. These covariances emerged between items loaded on the same factor and reflected closely related content.

Table 2. Model goodness-of-fit indices regarding the first-order CFA results of MHS

Goodness-of-fit Indices	MHS Fit Values	Acceptable Fit Criteria	Perfect Fit Criteria
χ^2/df	$\chi^2/df = 1,987$	$\chi^2/df \leq 5$	$\chi^2/df \leq 3$
CFI	CFI = ,951	$0,90 \leq CFI < 0,95$	$0,95 \leq CFI \leq 1,00$
NFI	NFI = ,913	$0,80 \leq NFI < 0,90$	$0,90 \leq NFI \leq 1,00$
GFI	GFI = ,862	$0,80 \leq GFI < 0,90$	$0,90 \leq GFI \leq 1,00$
AGFI	AGFI = ,830	$0,80 \leq AGFI < 0,90$	$0,90 \leq AGFI \leq 1,00$
RMSEA	RMSEA = ,067	$0,05 \leq RMSEA \leq 0,08$	$0 \leq RMSEA < 0,05$
SRMR	SRMR = ,044	$0,05 \leq SRMR \leq 0,10$	$0 \leq SRMR < 0,05$

(Anderson & Gerbing, 1984; Cole, 1987; Gürbüz, 2024; Hu & Bentler, 1999; Kline, 2019)

By examining the item contents, it was inferred that participants may have perceived these items similarly; therefore, the covariances were considered acceptable modifications (Gürbüz, 2024). Accordingly, the suggested modifications were applied, and Figure 1 presents the CFA diagram obtained after the modifications. Table 2 also presents the goodness-of-fit values for the modified model obtained after modification.

As displayed in Table 2, the goodness-of-fit indices supporting the construct validity of the MHS were at an acceptable level. Furthermore, as displayed in Figure 1, the standardized regression coefficients of the scale items ranged from .59 to .90 for the EI factor and from .64 to .90 for the MC factor. Average Variance Extracted (AVE) and Composite Reliability (CR) values were also calculated to provide further evidence regarding the psychometric properties of the scale. For the EI factor, the AVE was .66 and the CR was .95, whereas for the MC factor, the AVE was .64 and the CR was .95. Considering the recommended thresholds (AVE > .50 and CR > .70; Hair et al., 2014), these results suggest that the measurement model was psychometrically robust. It should be noted that a second-order CFA was not performed for the MHS because such an analysis requires at least three first-order factors (Kline, 2019).

Findings Related to Criterion Validity

The correlation coefficients between the MHS and SSS and CBMS were examined to ascertain the criterion validity of the MHS. For this purpose, the data collected from 272 married individuals were analyzed. Table 3 presents the correlations between the MHS total score and its factors, SSS, and CBMS. As demonstrated in Table 3, a high-level significant positive correlation was observed between the SSS and the MHS and between the SSS and the EI factor, and a medium-level positive correlation was observed between the SSS and the MC factor. Additionally, a medium-level significant negative correlation was observed between the CBMS and the MHS, EI, and MC. Consequently, the MHS, designed to measure married individuals' happiness levels, and the EI and MC factors were found to be valid constructs.

Reliability Studies

The reliability of the MHS was assessed by calculating Cronbach's α and McDonald's ω coefficients for internal consistency and the test-retest reliability coefficient for stability. The Cronbach's α coefficient was .97 for the MHS, .96 for the EI factor, and .95 for the MC factor in the data collected for the EFA. Similarly, McDonald's ω coefficient was .97 for the MHS, .96 for the EI factor, and .95 for the MC factor in this dataset. According to Büyüköztürk (2017), a reliability coefficient greater than .70 is sufficient for a measurement tool. The test-retest reliability coefficient was estimated to assess the extent to which the MHS was stable over time. For this purpose, the MHS was administered twice to 80 married individuals at 6-week intervals. The analyses revealed that the coefficients for the MHS total score, EI, and MC factors were $r = .85$, $r = .83$, and $r = .82$, respectively ($p < .01$). Therefore, it can be said that the MHS measures the concept of marital happiness in a stable manner. Consequently, the reliability findings for the MHS and its dimensions were satisfactory, and the developed scale demonstrated a reliable construct.

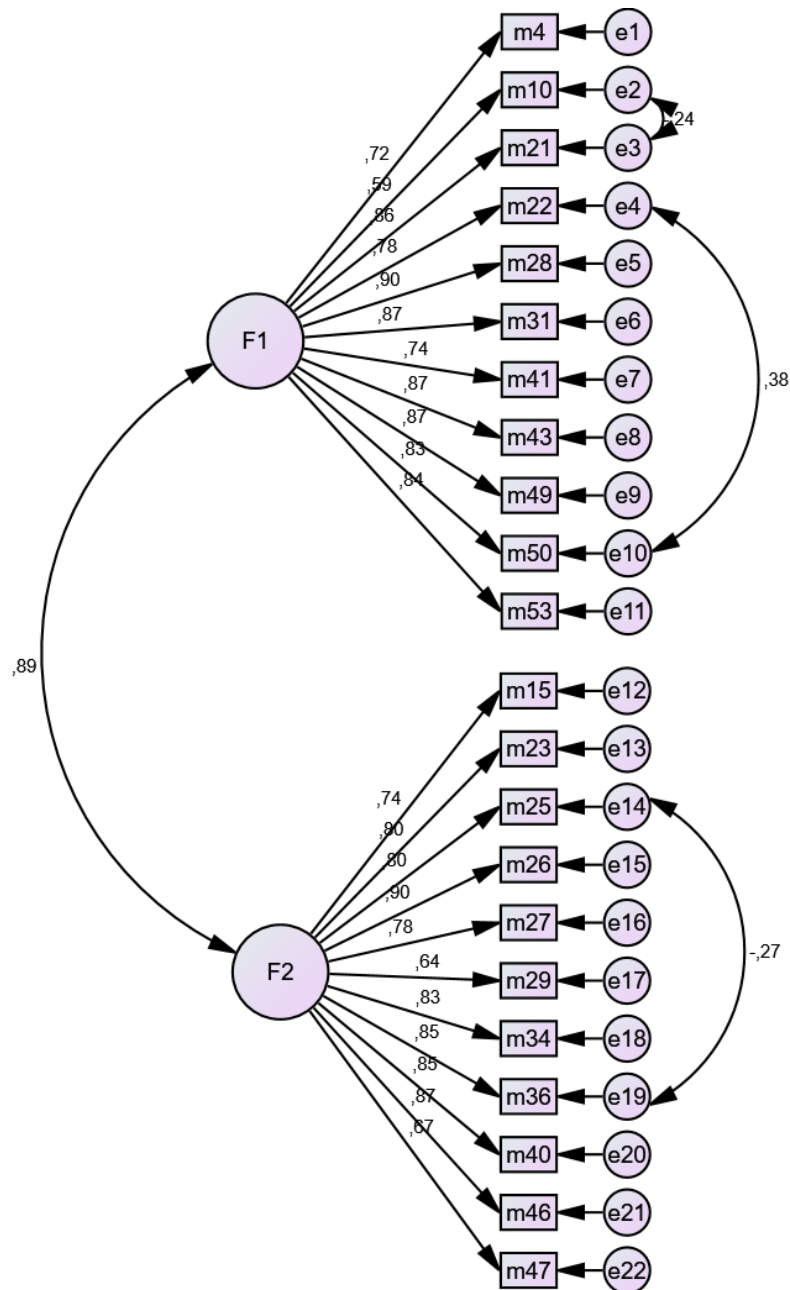


Figure 1. Diagram regarding the first-order CFA results of MHS

Table 3. Relationships between MHS and SSS and CBMS scores

	SSS	CBMS
MHS	,711**	-,613**
EI	,712**	-,646**
MC	,592**	-,469**

**p < ,01

Discussion

The strength and functionality of the relationship between spouses significantly influence healthy family functioning (Gladding, 2020). This study aimed to develop a valid and reliable measurement instrument to assess marital happiness, which is an essential component of relationship quality. Thus, the validity and reliability of the MHS designed for married individuals were investigated. Expert opinion, exploratory and confirmatory factor analyses, and criterion validity methods were used to establish the MHS validity. The reliability of the MHS was assessed by examining Cronbach’s α , McDonald’s ω , and test-retest reliability

coefficients. The results indicate that the MHS, developed in Turkish culture for married adults, is a reliable and valid instrument for assessing marital happiness.

The construct validity results of the MHS revealed that 22-items loaded onto two factors: EI and MC. The two-factor structure explained 70.21% of total variance. Although there is no absolute consensus in the literature, in the social sciences, a cumulative explained variance of approximately 60% in EFA is generally considered acceptable (Hair et al., 2010; Hooper, 2012). Büyüköztürk (2017) also emphasized the importance of reaching two-thirds of the total variance but noted that achieving this level is quite difficult in behavioral sciences. Therefore, the variance explained by the MHS can be regarded as satisfactory in this study. Moreover, CFA confirmed the construct validity of the 22-item, two-factor MHS. According to the CFA results, indices such as $\chi^2/df = 1.987 \leq 3$, $CFI = .951 \geq .95$, and $SRMR = .044 \leq .05$, indicate that the scale meets the perfect fit criteria. Additionally, indices such as $NFI = .913 \geq .90$, $GFI = .862$, $AGFI = .830 \geq .80$, and $RMSEA = .067 \leq .08$, indicate that the scale meets acceptable fit criteria (Anderson & Gerbing, 1984; Cole, 1987; Gürbüz, 2024; Hu & Bentler, 1999; Kline, 2019).

The correlation coefficients between the MHS, the SSS, and the CBMS were examined to assess criterion validity. The correlation coefficients regarding the MHS and relevant measures were satisfactory, indicating that it measures the intended construct in line with its purpose. Cronbach's α , McDonald's ω , and test-retest coefficients were estimated to determine the MHS's reliability, and it was found to be high for all indices.

The first factor of the MHS consists of 11 items that measure perceptions of emotional intimacy in the marital relationship. It refers to a close, intimate, and caring relationship with a spouse and is characterized by a deep mutual understanding and the active sharing of feelings (Sinclair & Dowdy, 2005). The second factor of the MHS consists of 11 items measuring perceptions of commitment in the marital relationship. It includes love, respect, and loyalty that spouses feel for each other in the face of both difficulties and positive experiences in life and is characterized by the ongoing investment made in the relationship (Adams & Jones, 1997; Gladding, 2020; Schoebi, et al., 2012; Stets & Hammons, 2002). The relationship between emotional intimacy, marital commitment, and overall marital quality has been frequently emphasized in the literature (Carasso & Segel-Karpas, 2024; Cordova et al., 2005; Givertz et al., 2016; Park & Park, 2018; Yoo et al., 2014). Sternberg (1986), in his Triangular Theory of Love, conceptualized love as a three-dimensional construct: intimacy, passion, and commitment. According to the theory, the components of intimacy and commitment play important roles in long-term close relationships, such as marriage, whereas passion is particularly significant in short-term romantic relationships. Therefore, the expression of the relationship between spouses on the concept of marital happiness may be reflected through emotional intimacy and marital commitment. Moreover, although marriages differ from one another owing to their unique dynamics and contextual conditions, happy marriages share similarities in relational dynamics, such as spouses' awareness of each other's inner world, sharing mutual fondness and admiration, supporting both individual and shared aspirations, and attributing a shared meaning to their relationship. These qualities, defined by Gottman and Silver (2019) as the fundamental principles of maintaining a happy relationship, demonstrate that happy marriages are grounded in deep friendship, and that marital happiness and stability are achieved through the systematic development of a profound emotional bond. Qualities such as spouses' awareness of each other's inner world and sharing mutual fondness and admiration strengthen the emotional foundation between partners and enhance intimacy, while qualities such as supporting both individual and shared aspirations and attributing a shared meaning to the relationship can be considered elements that ensure a long-term sense of meaning and fulfillment within the relationship and reinforce commitment. Accordingly, it can be stated that the emerging structure of the MHS largely aligns with both Sternberg's Triangular Theory of Love and Gottman's Sound Relationship House Model.

In the literature, there are various measurement tools developed to assess marital relationships. For instance, the scales developed by Tezer (1996), Çelik and Yazgan-İnanç (2009), and Akçabozan-Kayabol et al. (2023) primarily measure marital satisfaction, while the Dyadic Adjustment Scale, adapted into Turkish by Fıfıloğlu and Demir (2000), evaluates the level of marital adjustment. Conversely, the MHS developed in this study differs from existing measurement tools by focusing on the subjective perception of marital happiness of an individual.

The Relationship Happiness Questionnaire, developed by Fletcher et al. (1990) and adapted to Turkish culture by Tutarel-Kışlak (2002), was originally designed to measure happiness in the context of premarital relationships and was later adapted for married individuals in the Turkish context. However, as the dynamics of romantic and marital relationships (such as expectations from the relationship, influence of the extended family, and division of roles and responsibilities) may differ, this instrument may be limited in measuring marital happiness. Moreover, as it was developed in a different cultural context, it may not fully capture the marital processes specific to Turkish culture. Accordingly, individuals in Turkish culture embody characteristics of both individualist and collectivist cultures (İmamoğlu, 1998; Kağıtçıbaşı, 2022). This structure, explained through the concept of the autonomous–relational self, also shapes perceptions of marital happiness. In this context, marital happiness can be regarded as a construct emerging from the balance between autonomy, conceptualized as an individual-oriented dimension, and relatedness, conceptualized as a relational one. Within this framework, emotional intimacy emphasizes the importance of fulfilling emotional needs and can be regarded as an aspect of autonomy. Conversely, commitment emphasizes mutual loyalty and family bonds between spouses and represents the relational aspect.

The absence of a current, culturally specific measure that directly assesses marital happiness highlights the contribution of this study to the literature. Methodologically sound, valid, and reliable, the MHS can be utilized in both clinical practice and scientific research. For instance, clinicians can use the MHS to identify relational domains, such as emotional intimacy or commitment, that may require intervention during marital counseling. Researchers can use the MHS to examine the relationships between marital happiness and personal and relational variables. Additionally, the MHS may be useful in longitudinal studies to monitor changes in marital happiness over time or evaluate the effectiveness of couple-based interventions. Consequently, the two-factor structure of the MHS is psychometrically sound and theoretically meaningful and offers a significant contribution to the assessment of marital happiness in Turkey.

This study has some limitations. First, all study groups were formed using a convenience sampling method, and data were collected through an online survey. Therefore, individuals without internet access or with limited technological skills for participating in online research could not be reached. This may have limited the representativeness of our sample. In all study groups, the proportion of female participants was considerably higher than that of male participants, and this imbalance in gender distribution may have resulted in the scale items not fully reflecting the perceptions of male participants regarding marital happiness. Additionally, no cut-off score has yet been established for the scale. These limitations partly restrict the generalizability of our findings. Testing the MHS on more diverse samples in future studies will provide important contributions to its validity. Furthermore, when the scale is used more extensively in the field, it may be possible to establish different cut-off scores based on demographic variables such as age and gender.

Future research should identify the role of basic psychological needs, such as autonomy and relatedness, in marital happiness. The MHS can be used to examine personal and relational variables that influence marital happiness (such as spousal support and personality traits) as well as the associations between socioeconomic characteristics and marital happiness. In addition, the scale can be applied in longitudinal studies to monitor changes in marital happiness over time and evaluate the effectiveness of marital counseling or couple-based interventions.

Conclusion

This study aimed to develop a valid and reliable measurement instrument for assessing marital happiness, conceptualized as the subjective evaluation of individuals' degree of happiness across various dimensions of their marriage. The results indicate that the MHS is a valid and reliable instrument for measuring the marital happiness levels of married individuals. The MHS can be used by mental health professionals specializing in marriage and family therapy in clinical practice and by researchers conducting studies in this field. Consequently, the MHS can be regarded as a valid, reliable, and useful measurement instrument for providing services to married individuals, conducting educational programs, and supporting future research.

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Conflict of Interest: The authors declare no conflicts of interest related to this study.

Data Availability: The data from this study are available from the corresponding author upon reasonable request.

Ethical Approval: Ethical approval for this study was obtained from Hacettepe University Ethics Commission, with the decision dated 05.10.2022 and numbered E51944218-399-00002438381.

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