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## Portfolio for Professional Doctorate in Counselling Psychology (DPsych)

*A mixed methods feasibility study to evaluate an online relationship education intervention for couples*

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October 2020

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## PART B

*REDACTED*

## PART C

*REDACTED*

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In loving memory of my dad.

## **DECLARATION**

I hereby declare that the work presented in this portfolio is entirely my own,  
under the supervision of Dr. Trudi Edginton.

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## PREFACE

I once heard a talk by Christopher Voss, an academic, ex-FBI agent, businessman and author and was struck when he suggested that the most dangerous type of negotiation is the one that you don't know you are in. Whilst not posited within the context of psychology or counselling, this observation has often occurred to me as apposite to the counselling process and the workings of the mind. This has also proved apposite to my three-year training on this DPsychotherapy in counselling psychology. I have therefore selected *negotiating conflict* as the theme that binds together the major elements of this portfolio, the doctoral research (Part A), the client case study / process report (Part B) and the publishable journal article (Part C).

Negotiating conflict is a broad and far-reaching theme that has often been located at the heart of mental health issues (see Feixas et al., 2009) and has informed a range of theories including personal construct theory (Kelly, 1955) and the more recent third wave theories such as acceptance and commitment therapy (ACT; Hayes et al., 2011) that are based around negotiating choice points. Negotiating conflict underpins any psychological approach that conceives the mind in terms of parts, such as internal family systems (IFS; Schwartz, 1998). I have come to believe that the role of the therapist in these approaches is to help clients to see their internal conflicts and to empower them to find workable resolutions to their inner turmoil. Whilst providing a theoretical context seems relevant and appropriate in the preface to a doctoral portfolio, the emphasis in this preface is on some of the different conflicts that have been negotiated to produce this thesis.

The first and most obvious conflict was the one that I, the doctoral student, had to negotiate in order to commence this DPsychotherapy programme. I was originally accepted onto the course four years before I took up my place. I was desperate to get on with the training, particularly coming to counselling psychology as a second career. I paid my deposit, but then agonised. I had two teenage boys, one of whom would be going through his GCSEs and the other sitting his A Levels at the same time that I would be submitting my thesis. My mind played all sorts of tricks on me as I tried to negotiate this inner conflict – perhaps the most laughable being a fantasy of the three of us sitting round the table working together on our studies! The part of me that desperately wanted to start the training grappled and argued with the ‘good mother’ part of me. This conflict is familiar to so many women, and

increasingly men too, who juggle the conflicting demands of career and family. Eventually, both my self-parts negotiated their conflict and agreed that I would defer for a year. As it happened, the deferral lasted four years – an endorsement of my choice to give time to my children before they set sail into their own adult lives.

The second main conflict that had to be negotiated throughout this training was the apportioning of my time. I have retained my private practice throughout the doctorate, both to fund my studies and also because I somewhat idealistically felt this would be easier than turned out to be the case. I have negotiated conflicts between seeing friends and completing coursework. I have negotiated conflicts between the needs of my family and the academic demands of the course. I have negotiated conflicts between deadlines and exhaustion. All these negotiations have been made easier by my age and experience, and also by having an endlessly supportive partner and two adult sons who can now cook for themselves!

Part A of this thesis presents the culmination of a research study that focuses on couple relationships. The research evaluates a short programme of relationship education videos (REVs) for couples. There were multiple conflicts to be negotiated in the process of completing this research. I secured the support of nationwide relationship charity Relate to help with recruitment for the study. However, in the process I had to negotiate conflicts within Relate, where executives were concerned that a programme of couple relationship education (CRE) might erode their business model based on face-to-face couple therapy. I also had to negotiate conflicts with the administration staff who were already under pressure and now needed to find additional time to send out recruitment packs. Many of the couples themselves were struggling to negotiate their own conflicts, with around half of the study participants having been recruited whilst waiting for their first couple therapy appointment with Relate. Other participants were recruited ‘as found’ (AF) in the general population. Email correspondence with many of these AF participants during the process of recruitment highlighted how signing up for a research study as a couple involves some level of conflict negotiation, particularly where one partner wants to participate and the other less so. But perhaps the most notable conflict that I had to negotiate in this research study was the apparent conflict between my qualitative and quantitative research findings.

Maybe the most salutary conflict that I have had to negotiate has been between my own personal romantic relationship and the focus on supporting other relationships through my research study. There has been a sense of irony over the

past three years that I have hardly had time for my own relationship as I have juggled the demands of the course. However, the focus in the intervention is on helping couples to develop shared values as a couple, and this focus has helped my partner and me negotiate the conflict between the course and family priorities over the past three years. The focus in the intervention on commitment and investment has been evident in the way I have been supported through this journey by my partner and children. This has reinforced my personal belief that happy, supportive and committed relationships make the world of difference to how we cope with the challenges and demands of living.

Part B of this thesis presents a case study and process report of ‘Fiona’ (not her real name). I worked with Fiona whilst I was on placement at a specialist hospital for eating disorders. My work with her utilised an integrative approach, but particularly emphasised working with IFS (Schwartz, 1998). Through this approach, Fiona became familiar with different parts of herself that were in such conflict that her only way to manage the emotional pain was through her eating disorder and sex. Fiona’s sense of herself was deeply buried beneath a mountain of shame. But as we worked together, she was able to see herself with a new perspective and to reconnect with her values. Powerful though this was, Fiona had an intense struggle with the voice of the eating disorder and that of self-loathing. But the compassionate, benevolent stance of IFS helped her to understand that this was a negotiation and that she had choices in what position she took. To reference back to Christopher Voss’s observation, Fiona was increasingly empowered as she strengthened her awareness of the negotiation in which she was involved.

The final part (Part C) of this thesis is a journal article. There were a number of conflicts that had to be negotiated in the writing of this article. Firstly, there were many topics on which I could have written. I wanted to write about the conflicts I experienced as both a market researcher and an academic researcher. I was also interested in writing about the apparent conflicts between ‘true’ qualitative research and the qualitative data obtained in this study through the self-record method. However, in the end, I was influenced by an eminent professor of psychology with whom I was discussing this dilemma. His response to my quandary was to publish the key results from my doctoral research, telling me that “if it isn’t published, it might as well not exist”. Hearing that research doesn’t exist without publication brought a new level of awareness to my understanding about academic research and how it effects change.

There will, no doubt, be many further conflicts for me to negotiate. However, my original choice to complete this demanding and rewarding doctoral programme has never been up for re-negotiation. I have enjoyed the whole process, my personal growth and my greater understanding of the mind and how it continually tempts us into (sometimes unhelpful) negotiations with our own thoughts.

## PART A: DOCTORAL RESEARCH

### AN ONLINE PROGRAMME OF COUPLE RELATIONSHIP EDUCATION: A mixed methods feasibility study.

#### Abstract

*The aim of this study was to evaluate the feasibility, acceptability and effectiveness of a novel online, low-dose (<1 hour) programme of relationship education videos (REVs) for couples. Relationship distress is ubiquitous but couple therapy is often stigmatised and thus delayed or avoided. Moreover, cost and logistics accentuate social inequality regarding accessibility. The need for an accessible, affordable, universally relevant and non-stigmatising intervention is therefore vital. This study was a mixed methods equal-status (experimental and qualitative) design. Seventy one couples reflecting a spectrum of relationship distress and different types of relationships (in terms of ages, relationship duration and relationship status) were randomly allocated into one of three groups (23 REV, 23 shared relationship activity (SRA), 23 wait-list control (WLC)). Participants in the SRA group watched and discussed three nature videos over three weeks. Participants in the REV group watched and discussed the three REVs over the same time period. Analysis of self-report data found almost complete adherence with all elements of the REV programme and there was no attrition once couples committed to participate. Whilst there was no improvement on some predicted measures, there was a significant improvement in relationship satisfaction in the REV group. Thirty-two REV participants self-recorded interviews about their experiences. A thematic template analysis identified three themes that described the processes underpinning the improvement in relationship satisfaction. Firstly, participants ‘weighed up the risks versus rewards of participating’. Secondly, they valued ‘the structure, framework and focus’ provided by the REV in helping them work on their relationship. And thirdly, the video content ‘reframed perspectives on me, you and us’. The integration of qualitative and quantitative results suggest considerable potential for the REV as a universally relevant entry-level intervention for couples. Further research should evaluate whether these findings are maintained over the longer term.*

## **Abbreviations**

ANOVA:	Analysis of variance
AF:	As found couples (couples not waiting for counselling, from the broader population of couples)
CL <sub>alt</sub> :	Comparison level with alternatives
CL <sub>crt</sub> :	Comparison within current relationship
CCET:	Couple coping enhancement training
CRE:	Couple relationship education
IBCT:	Integrative behavioural couples therapy
MFT:	Marital and family therapy
MM:	Mixed methods
MMR:	Mixed methods research
OUR:	Observe, understand, resolve (relationship education programme)
PREP:	Prevention and relationship education programme
REV:	Relationship education videos
RA:	Relationship awareness
SRA:	Shared relationship activity
T1:	Time one (pre-intervention)
T2:	Time two (post intervention)

*Note:* Referencing style used in this portfolio is APA-7

## **Chapter 1. Introduction**

This dissertation reports on the findings of a mixed methods research study that examines the feasibility, acceptability and effectiveness of an online programme of couple relationship education (CRE) that comprises three relationship education videos (REVs) developed by the researcher. This REV programme is theoretically integrative and is underpinned by a range of theory, literature and research. The REV programme is intended to meet a need in the UK for a universally relevant programme of CRE that can act as a gateway or entry point to a broader network of relationship resources including face-to-face counselling and more topic-specific or targeted CRE. The online delivery is intended to achieve breadth as well as effectiveness and acceptability of CRE.

The literature review (Chapter 2) opens with a focus on literature that highlights why intimate relationships are relevant to the field of counselling psychology. Literature is then discussed and critiqued with regard to the social, systemic, psychological and physical hazards of widespread relationship distress and relationship breakdown. Interventions (couple therapy and CRE) for couple distress are then discussed and critiqued based on their suitability for different levels of distress and couple types. Literature is then evaluated to examine ways in which research is shaping improvements in CRE interventions with regard to effectiveness, acceptability and reach, most notably through recent online and flexible delivery programmes. The chapter then examines literature which evaluates the role for a universally relevant CRE intervention. The theoretical underpinnings of the REV are then discussed and critiqued, and the chapter concludes with an evaluation of methodological issues relevant to research in the field of CRE.

Chapter 3 presents the methodology for the present study. This chapter starts with a purpose statement, methodology overview and description of materials. The philosophical worldview of pragmatism is then introduced and discussed, followed by an overview of the mixed methods approach to research and a description of the research design, including both qualitative and quantitative designs. The process of sampling and recruiting participants is then described and demographics of the final sample are provided. There then follows a detailed description of the data collection and procedures for both the qualitative and quantitative arms of the study, including descriptions of the quantitative measures and qualitative discussion guides, recording and transcribing processes. The analytic strategies are described

sequentially for the mixed, quantitative and qualitative analyses, with a detailed description of how the data was integrated both methodologically and at what point in the research process. The chapter concludes with a discussion of ethical issues and a final evaluation of the methodological considerations in the present study.

The mixed and quantitative analysis is reported in Chapter 4. This chapter presents the first five of a total of six studies in the present research (1a-1e). Each study is based around different sub-questions and hypotheses that variously explore the feasibility, acceptability and effectiveness of the intervention. Study 1a reports on a mixed analysis of feasibility issues relevant to the recruitment and retention of participants and shows very low levels of attrition between the point of consent and study completion. Study 1b reports on a mixed analysis of feasibility issues regarding programme adherence and finds high levels of adherence to all elements of the programme. Study 1c presents a mixed analysis on intervention acceptability and finds that all participants found the programme offered either a very positive (77%) or fairly positive (23%) experience of the REV. Study 1d reports on the quantitative analysis of intervention effectiveness with regard to four outcome measures: relationship satisfaction, investment size, commitment level and emotional intimacy. The results showed that significant improvements between time one (T1) and time two (T2) were only noted for the measure of relationship satisfaction, meaning that hypotheses predicting improvements on measures of commitment level, investment size and emotional intimacy were not supported. The qualitative study 1f was used to examine this surprising finding and is reported in Chapter 5. Study 1e reports on a mixed content analysis on issues relevant to the future direction of the REV (impact, improvements and presenter issues).

Chapter 5 reports the sixth study (1f) – a qualitative thematic analysis of short, self-directed audio interviews with a total of 32 participants. This chapter presents the thematic template and then describes each of the three overarching themes, their sub-themes and level-3 themes (where appropriate). This qualitative thematic template analysis was conducted in isolation from the other mixed and quantitative analysis, but the reporting integrates mean T1 and T2 relationship satisfaction scores for participants in order to contextualise the distress levels for each participant / couple. References to broader literature are also interspersed occasionally to contextualise some findings.

The discussion in Chapter 6 integrates the findings from the mixed, quantitative and qualitative analysis and discusses these findings within the context

of the research question(s), hypotheses and broader literature. The lack of predicted improvement on measures of commitment level, investment size and emotional intimacy are discussed and anomalies between the qualitative and quantitative findings are considered. Methodological issues about how CRE is researched and evaluated are discussed along with limitations of the present research study and suggestions for future research directions. This chapter ends with an overview of conclusions drawn from the present study.

Chapter 7 concludes this thesis with an account of the researcher's reflexivity on her positioning in the research process. She also reflects on how she has been changed by this research experience and discusses her hopes for the REV and future directions. Whilst this reflexivity chapter is presented as a single account at the end of this dissertation, it was based on insights and experiences gained throughout the research process that were recorded in a research journal between October 2018 and October 2020.

## **Chapter 2. Literature Review**

### **2.1 Introduction**

This chapter reviews the literature that shaped the development and evaluation of the relationship education video (REV) programme of couple relationship education (CRE) examined in the present study. The chapter opens with a review of literature on relationships and the impact of relationship distress to contextualise why couple relationships are a relevant area of study for counselling psychologists. The chapter then focuses on interventions, including couple therapy and CRE, and discusses their aims, methods, approaches and modes of delivery in addition to attitudinal and practical barriers that constrain their uptake. Literature relevant to the development of the REV is then discussed regarding delivery method (online), which couples are targeted (both high and low distress), level of intervention (universal entry-level intervention to a broader, flexible programme), programme focus (predominantly dyadic), format (fully self-administered) and dosage (low: three 15-minute videos). The chapter then reviews the theory and literature informing the content selected for the three videos (video 1: commitment; video 2: investment; video 3: emotional intimacy). This section discusses the theoretical grounding of the REV in social exchange theory (Kelley & Thibaut, 1978; Thibaut & Kelley, 1959), the investment model of relationships (IMR; Rusbult, 1980a, 1983; Rusbult et al., 1998), Solomon's (1994) theory of love, Sternberg's (1986) triangular theory of love, the interpersonal process model (IPM) of intimacy (Reis & Patrick, 1996; Reis & Shaver, 1988) and the behavioural model of intimacy (Cordova & Scott, 2001). The final section of the chapter reviews the literature that informed the programme structure (videos, discussion and behaviour change) and methodological issues relating to CRE research. The chapter concludes with a summary table of the aims, research questions and hypotheses for the present study with reference to associated supporting literature.

## **2.2 Intimate relationships and counselling psychology**

Counselling psychology has traditionally focused on individuals in a one-to-one, in-person therapeutic setting (Strawbridge & Woolfe, 2010). However, this thesis argues that counselling psychology should also be at the forefront of research supporting couple relationships. The rationale for this is that romantic relationships are a universal human experience (Fisher, 1989; Gottschall & Nordlund, 2006; Jankowiak & Fischer, 1992), an important developmental milestone (Arnett, 2014) and fulfil the most basic human need to belong, love and be loved (Baumeister & Leary, 1995).

Close relationships allow us to feel connected to other human beings and are a major focus of human concern, as indicated by the 830 million results from a Google search of the term ‘close relationships’. Kelley et al. (1983) define close relationships as involving enduring strong, frequent and diverse interdependent connections. Bradbury and Karney (2019) incorporate into this definition the promise of some kind of shared or expressed sexual passion to distinguish a dyadic relationship as intimate. The merits of strong, healthy relationships benefit families, society and enhance the well-being of children (Cummings et al., 2003; Harold et al., 2016; Sturge-Apple et al., 2006). Being in a satisfying relationship powerfully predicts life satisfaction (Ruvolo, 1998) promotes longer life (Johnson et al., 2000), physical and psychological well-being (Kiecolt-Glaser & Newton, 2001; Proulx et al., 2007), lower use of health services (Prigerson et al., 1999), reduced absenteeism from work (Markussen et al., 2011) and enhanced workplace performance (Renick et al., 1992).

Sex and gender is relevant when thinking about intimate relationships. Baumeister and Sommer (1997), as social psychologists, argue that, whilst relationships fulfil our basic need for belonging, this need is fulfilled differently by men and women. Whilst a conclusive link between sexually dimorphic traits in brain structure and function associated with relationship behaviours has not been fully evidenced (Baron-Cohen, 2010; Fine, 2005, 2017; Rippon, 2019), notable differences have nonetheless been observed in how males and females behave, think and interact in relationships. Cross and Madson (1997a) found that male self-construals are more independent compared with more interdependent self-construals amongst women, implying that female behaviour is more motivated by the goal of maintaining intimate relationships than male behaviour. Women appear to be more aware of their relationships and are more likely than men to view things

from a couple perspective (Acitelli, 1992; Cate et al., 1995). However, when viewed through the lens of gender hegemony, this literature can be critiqued as presenting too binary a view of sex and gender that fails to take account of multiple masculinities and multiple femininities (Budgeon, 2014) as well as issues of gender identity and transsexualism (Abbott, 2016) in romantic relationships.

### **2.3 Relationship distress and counselling psychology**

Couple relationships are relevant to counselling psychology as relationship problems are the most common reason for seeking counselling (Swindle et al., 2000). Despite most relationships starting out with high relationship satisfaction (Bradbury et al., 1998), 25–30% of couple relationships are distressed at any point in time (Relate, 2016; Whisman et al., 2008). Relationship distress can have lasting consequences, with almost half of UK and USA marriages ending in divorce (CDC, 2018; Copen et al., 2012; ONS, 2016), and breakup is even more prevalent amongst co-habiting couples (Jose et al., 2010). The consequences of divorce can be serious, particularly in terms of mental health (Menaghan & Lieberman, 1986; Richards et al., 1997). Divorced individuals are three times more likely to kill themselves than married people (Smith et al., 1988) and it is mostly men who kill themselves (Kposowa, 2000). Whilst men are more likely to suffer severe proximal mental health effects of divorce, women suffer more distal losses due to reduced income and single parenting (Leopold, 2018). This may reflect that divorce comes as a greater shock to men than women, given that around 70% of divorces are initiated by women (Rosenfield, 2018), and men have a greater tendency to minimise relationship distress (Carlson et al., 2012; Mansfield et al., 2005; Vogel et al., 2006). The mental health consequences of relationship breakdown can also be serious for children of divorcing parents (Cherlin et al., 1991). These issues are much more complex than positioning divorce as either good or bad / right or wrong, as argued by Lebow et al. (2012) and Amato (2001). But the adverse impact of relationship distress on such a broad range of physical and mental health outcomes makes it imperative for counselling psychology to be engaged in supporting fulfilling intimate couple relationships.

## **2.4 Interventions for relationship distress**

**2.4.1. Different levels of intervention.** A key issue when developing the present intervention was deciding on the level of intervention and type of couples it should support. CRE typically aims to prevent relationship deterioration amongst well-functioning couples (primary prevention) or by targeting couples at high risk of relationship breakdown (secondary prevention). Couple therapy is typically focused on treating relationship distress or crisis (tertiary intervention). Currently the UK is largely constrained to tertiary interventions, with couple therapy available both privately and through charitable organisations (Relate, Marriage Care) and through IAPT (Improving Access to Psychological Therapies). The researcher was unable to locate much UK research into CRE, although a mapping study by Clark et al. (2009) found that 61% of UK CRE was delivered via religious organisations, indicating limited CRE options for non-religious couples. A study by Spielhofer et al. (2014) evaluated Marriage Care's pre-marriage course and found a statistically significant positive change in well-being for individuals as measured by the Warwick-Edinburgh mental well-being scale ( $d=0.20$ ) and a follow-up study found couples more amenable to accessing further relationship support as a result of participating in the course. Several studies have found locally delivered UK CRE programmes to be well-received but did not collect any outcome data (Chang & Barrett, 2009; Coleman, 2012). This leaves a significant gap in both knowledge and delivery of CRE in the UK.

**2.4.2. The need for CRE in the UK.** The aforementioned literature highlights the pressing need for CRE in the UK that is supported by the Relationships Alliance, a UK consortium of four organisations at the forefront of delivering relationship support in the UK (Relate, OnePlusOne, Marriage Care and Tavistock Relationships). Their manifesto (Relationships Alliance, 2017) lobbied the UK government to invest in a universally suitable self-administered programme of CRE that could be administered alone or integrated flexibly with other topic-specific information, online coaching or face-to-face interventions. To date the researcher is unaware of any UK research towards this goal and the present study is intended to fill this gap.

In bringing a counselling psychology perspective to the development of the REV, the intervention is embedded in relationship theory and research but also in established models of counselling designed to alleviate distress. The social justice

focus of counselling psychology informed a specific emphasis when developing the REV on optimising its feasibility, acceptability and effectiveness regardless of participant age, relationship length, relationship type, distress level, sexuality, gender, culture, ethnicity, class or income. To achieve this, there is a need to improve accessibility to CRE, as highlighted in a major study by the UK relationship charity Relate with over 5000 individuals, which found that 40% of the sample was unaware of how or where to access relationship support (Marjoribanks & Bradley, 2017). Incorporating this finding into the present study, the REV is proposed as a single point of access for relationship support for couples. But Bradbury and Lavner (2012) argue that CRE suffers when it adopts a stance of one-size-fits-all, and that programmes must become more sophisticated, nuanced and targeted in their approach. In light of this, the REV positions itself as an entry-level programme of universally relevant CRE from which couples can spring-board, where necessary, into a broader network of tailored online CRE resources (i.e. on communication skills, same-sex relationships, polyamory, transition to parenthood, second marriages, blended families, managing stress, growing older and sex therapy) or to more intensive face-to-face interventions (couple therapy). Collaboration is essential to facilitate this integrated network of resources. The Relationships Alliance has already established a strong foundation of collaboration and the present research offers itself into that domain.

**2.4.3. Barriers to help-seeking.** A key consideration in developing the REV was to make it easy and appealing for couples to engage with in order to minimise barriers to early intervention and universal acceptability. Couples often believe that they should be able to sort out their problems themselves, find it unacceptable to acknowledge or discuss relationship difficulties and also conceive accessing help as failure or symbolic of partner disloyalty (Chang & Barrett, 2009; Walker et al., 2010). Feelings of shame and stigma underlie much reticence in help-seeking (Marjoribanks & Bradley, 2017), with this stigma being most acutely experienced by men (Clement et al., 2015; Skogrand et al., 2010; Vogel et al., 2006). Men in particular fear that talking about their relationship could reveal problems that may lead to break-up (Burr et al., 2017; Rogge et al., 2013; Wood et al., 2014) and UK attitudes towards help-seeking may be amplified by the British culture of the stiff upper lip (Challis, 2016).

**2.4.4. Limitations of tertiary interventions (couple therapy).** These barriers are particularly notable with regard to tertiary interventions. The pressing need for CRE in the UK comes from evidence suggesting that couple therapy in isolation is a necessary but inefficient intervention for addressing the ubiquitous problem of relationship distress. Firstly, because couples wait on average six years in distress before attending therapy (Gottman, 1994). This means that, for many, couple therapy is often accessed too late to bring benefit (Snyder et al., 1993). Secondly, because individuals often perceive that they need to be in crisis to warrant attending counselling (Park, 2007). And thirdly, because many couples fail to access help when it would be most valuable, as they hope that their issues are circumstantial and will pass (Baker et al., 2017; Story & Bradbury, 2004). The implication here is that relationships are usually in crisis by the time couples engage with couple therapy.

Despite the challenge of reversing moderate to severe relationship distress, couple therapy can nonetheless be effective. A meta-analysis of randomised controlled trials found improved relationship functioning in around 80% of couples compared with no treatment (Shadish & Baldwin, 2003). There are many different models of couple therapy (Gurman et al., 2015) and reviewing these is beyond the scope or focus of this chapter. However, research has consistently found relatively few reliable differences in effectiveness according to treatment approach (Shadish & Baldwin, 2003; Snyder et al., 2006), leading some to propose a common factors perspective on couple interventions (Christensen, 2010; Davis et al., 2012). Based on the concept of common factors, Christensen (2010) proposes five goals for any couple intervention, as follows: altering the couple's view of the presenting problem to be more objective, contextualised and dyadic; decreasing emotion-driven, dysfunctional behaviour; eliciting emotion-based, avoided, private behaviour; increasing constructive communication patterns; and emphasising strengths and reinforcing gains.

As discussed later in this chapter, elements of integrative behavioural couple therapy (IBCT) were used to shape aspects of the REV. IBCT has been shown to improve relationship quality in approximately 75% of couples (Lebow et al., 2012; Shadish & Baldwin, 2003, 2005). However, salutary findings in effectiveness studies for couple therapy generally indicate that fewer than 50% of couples complete therapy, 40% achieve only non-clinical levels of relationship adjustment and 30–60% relapse back to baseline levels in the period following

treatment (Roesler, 2020). Additionally, couple therapy is both expensive and time-consuming (Christensen et al., 2010) and UK waiting lists for couple therapy are long. This evidence suggests that, whilst couple therapy plays an important role in treating relationship distress, there is a need for more efficient and effective, widely available psychoeducation for couples. Chang (2005) argues that, as scientist-practitioners, counselling psychologists should be at the forefront of researching and developing online psychoeducation materials that have potential to increase reach to under-served populations.

**2.4.5. Primary and secondary interventions: CRE.** CRE is widely regarded as an effective psychoeducational intervention for couples, with a meta-analysis by Hawkins et al. (2008) of 117 studies finding effect sizes for CRE in experimental studies ranging between  $d=0.30$  and  $d=0.36$ . However, evaluating the true effect of CRE requires extended follow-up assessments and, whilst most studies have only looked at proximal effects, there is evidence of benefits lasting at least one year in and possibly up to five years (Halford & Bodenmann, 2013).

Many countries outside the UK place a strong focus on CRE to support couple relationships. CRE can be defined as the provision of structured information to couples about relationship knowledge, skills and attitudes (Halford et al., 2008). CRE has traditionally been delivered face-to-face in religious settings and has emphasised the strengthening of relationship skills to prevent rather than remediate relationship distress (Blanchard et al., 2009). Whilst couple therapy is usually a tailored approach, CRE, by contrast, is more generalised and educational. However, an attitudinal barrier to CRE is the belief that adults should naturally know how to be good partners (Chang & Barrett, 2009). CRE is widely supported by governments in the USA, Australia, Japan and Germany and each provides substantial funding for it (Huang, 2005; Ooms, 2005; Van Acker, 2008). However, the UK lags behind these countries, despite widespread evidence that CRE can be effective. An inadvertent advantage of the UK coming to CRE comparatively late is that there was a far greater body of evidence on which to draw when developing the REV intervention. The following section evaluates the literature that informed the development of different elements of the REV.

## **2.5 Improving the impact of CRE through online delivery**

The internet has been under-utilised as a resource for CRE (Ponzetti, 2016), so the researcher was keen for the REV to optimise cost efficiency by delivering it online, as greater breadth is increasingly regarded as an important standard for evaluating public health initiatives (Flay et al., 2005; O'Cathain et al., 2019). Whilst counselling psychology has typically focused on in-person counselling, Mallen et al. (2005) argue that online psychoeducation should be considered a core component of counselling psychology, particularly given the millions of individuals accessing information on the internet. Doss et al. (2013) argue that CRE reach has become constrained through its roots in face-to-face, in-person delivery, which fails to address the aforementioned issues of stigma as well as the economic, logistical and geographical constraints to scaling up CRE (Halford & Casey, 2010; Nelson & Bui, 2010; Sareen et al., 2007). Couples and individuals increasingly express a preference for accessing relationship support online (Georgia & Doss, 2013; Marjoribanks & Bradley, 2017), and comfort with web-based resources has increased post-Covid (Wen, 2020).

An early meta-analysis of 13 studies evaluating self-directed CRE found small but non-significant effects on relationship quality ( $d=0.32$ , ns; McAllister et al., 2012). However, few of the self-administered programmes in this meta-analysis were delivered online. More recent studies have found that self-directed online programmes may deliver comparable effects to their face-to-face counterparts (see Braithwaite & Fincham, 2014; Zemp et al., 2017). An examination of the OurRelationship programme (an eight-hour online version of IBCT) found greater improvements in a nationally representative sample of 300 couples for the intervention compared with the wait-list control ( $d=0.69$ ; Doss et al., 2016) and that these effects were stable over 12 months (Doss et al., 2019). Another computer-based programme, ePREP, has also demonstrated statistically significant impacts on commitment, communication, anxiety and depression (Braithwaite & Fincham, 2007, 2011, 2014). The benefits of the OurRelationship and ePREP programmes extend beyond the relationship, with significant improvements noted in both mental and physical health following both these online programmes compared to a control group (Roddy et al., 2020). However, both these programmes involve regular contact with coaches / trainers and it is therefore unclear what contribution human involvement makes in their effectiveness. Taken together, this evidence suggests that online interventions can increase the reach of effective CRE through their low

cost, web-based format, and these interventions provided the rationale for delivering the REV online.

## **2.6 Flexible delivery for high relationship satisfaction couples**

The internet offers considerable benefits for CRE in terms of programme flexibility (Busby et al., 2015), with Doss et al. (2016) concluding that flexibility offers exciting future potential for an integrated stepped-care approach for CRE. Halford et al. (2004) examined the benefits of Couple CARE, a flexible skills-based CRE programme with newly committed couples with moderate to high relationship satisfaction. All couples attended an initial in-person relationship skills assessment and couples in the treatment group then participated in a mix of self-directed activities involving guidebooks, videos and supporting phone calls, with feedback from a team of psychologists. Post-hoc assessment findings were compared with couples in a wait-list control group and showed that Couple CARE had a beneficial small-to-moderate effect on relationship satisfaction and relationship stability. Whilst immediate gains were most notable amongst the least happy couples, there was limited evidence that couple characteristics differentiated the effects of the programme. Evidence from this study notes high completion and engagement with all tasks and activities (96% of couples), suggesting that flexible self-directed programmes are effective and also good for adherence and engagement.

## **2.7 Role of trainer or therapist support in self-directed CRE**

Interpreting the results of the Halford et al. (2004) study into flexible delivery of CRE is challenging as it is unclear how much effect of the self-administered programme was due to contact with psychologists. To examine whether contact with trainers or psychologists amplifies the effect of CRE, Bodenmann et al. (2014) compared the outcomes of a self-directed programme of CRE when administered with no human support versus when the same programme was provided with support from trainers. Their hypothesis that trainer support would amplify outcome was not supported and this informed the decision to develop the present REV intervention as a stand-alone and fully self-administered programme of CRE.

## **2.8 CRE across breadth of couple distress**

Online delivery makes a universal programme of CRE with broad reach technically possible. However, when developing the REV, consideration was given to identifying content that would be universally relevant to couples, regardless of relationship differences and across different categories of couples. CRE tends to attract couples who are at least risk of relationship breakdown, with the absence of high-risk couples from CRE programmes being widely reported (Bradbury & Lavner, 2012; Halford et al., 2006; Sullivan & Bradbury, 1997). However, couples at high risk of eventual relationship breakdown are particularly likely to benefit from CRE in the short term compared to low-risk couples (Halford et al., 2017; Quirk et al., 2014; Sullivan & Bradbury, 1996). A current debate about interpreting these differences considers the role of methodological issues regarding ceiling effects, where there is limited scope for improvement when couples have high baseline scores (Wadsworth & Markman, 2012; Wang et al., 2008).

## **2.9 CRE for high distress couples**

However, this measurement debate does not detract from the small but growing body of literature indicating that CRE is beneficial for distressed as well as happy couples. In contrast to couple therapy, where high distress predicts poor outcomes, high distress couples attending CRE programmes appear to experience greater benefit than satisfied couples. Key in evaluating effectiveness of CRE is whether it ameliorates relationship decline or sustains improvement long term. However, there is limited evidence that targeting high-risk couples results in beneficial long-term effects. Two large scale studies have examined the long-term effects of CRE with low-income couples and reported overall effects that were either null (Wood et al., 2014) or very small (Lundquist et al., 2014) after three years. However, this may reflect methodological and logistical issues as the Wood et al. study found that only a minority of couples attended even half of the sessions. Online delivery may improve adherence as couples can participate at home. OnePlusOne, a UK charity focused on strengthening relationships for disadvantaged couples, has developed some innovative online learning resources for couples at high risk of relationship distress. Whilst there is no published evidence, anecdotal feedback indicates that this is working well at engaging high-risk couples in relationship support (<https://www.oneplusone.org.uk/>).

## **2.10 Differences between high- and low-satisfaction couples**

In looking to develop a universally acceptable programme of CRE, the researcher closely examined differences in how high- and low-satisfaction couples respond to CRE. Halford et al. (2015) examined differences in the immediate impact of CRE on high- versus low-satisfaction couples and found couples with low baseline satisfaction showed more substantial increases in satisfaction after CRE than couples with high baseline satisfaction, although these results are again potentially subject to ceiling effects. Another study compared the different effects of CRE over four years between high- and low-satisfaction couples. Halford et al. (2017) randomly assigned 182 couples to either Couple CARE (a flexible delivery skills-based CRE), Relate (assessment, feedback and goal setting) or book-reading (control). High-satisfaction couples experienced no improvement in relationship satisfaction in any of the three conditions whereas low-satisfaction couples experienced some improvements in the Relate and Couple CARE groups, although these effects dissipated over 6–12 months. However, both the control and Relate groups provided couples with some version of relationship support so it is not clear, therefore, whether these data really convey a null effect of the CRE in high-satisfaction couples or whether one of three alternative explanations might apply. Firstly, it could be that the ceiling effect is masking any effect in high-satisfaction couples (Wadsworth & Markman, 2012). Secondly, it could be that high-satisfaction couples are more susceptible to a softer intervention such as reading and assessment than distressed couples. Thirdly, four years is still a relatively short time in the life-span of a relationship to evaluate prevention in high-satisfaction couples. Coie et al. (1993) make the sobering point that sometimes prevention effects are not observable without at least a decade of longitudinal data.

A limitation of both of the Halford et al. studies (2015, 2017) is that they only examined effect at the quantitative level, whereas Whisman et al. (2008) identified the possibility that relationship distress is taxonomic and that distressed couples differ both qualitatively and quantitatively from happy couples. When taken together, the findings from Halford et al. and Whisman et al. indicated that the present study should evaluate both nuanced qualitative as well as quantitative differences in the way high- and low-satisfaction couples responded to the REV intervention. Therefore, as well as measuring the quantitative impact of the present REV programme, as is the convention when evaluating CRE research (Sprenkle, 2012), an aim of the present study was to better understand the more nuanced and

subjective experiences of participants to evaluate its acceptability, feasibility and subjective effectiveness across a broad spectrum of couple types:

***Qualitative research question:*** What are the experiences of individuals participating in the REV programme?

### **2.11 Dyadic focus**

In developing the REV, consideration was given to whether couples should participate together or separately, as some programmes (i.e. OurRelationship programme) offer both options. The rationale for the collaborative, dyadic focus of the REV came from Boker and Laurenceau (2006) who proposed that happiness corresponds to the dynamic system of spousal interactions and also from research noting greater improvements when couples attend CRE together (Adler-Baeder et al., 2010). Despite little research on the specific dyadic processes underpinning this finding, creating a shared identity is critical to interdependent relationships (Aron et al., 1991) and so in developing the present intervention, the researcher felt that shared activities and unified detachment (the capacity to reflect together as a couple on the relationship) should be central to the programme design. Unified detachment is a key concept from IBCT (Doss et al., 2013).

### **2.12 Self-reflection and personal responsibility**

Despite the dyadic focus, emphasis in the REV videos was also placed on self-reflection and personal responsibility. Halford et al. (2007) found that the extent to which each partner reflects on their relationship and takes personal responsibility for its enhancement is an important predictor in sustained relationship satisfaction. Self-reflection is incorporated into IBCT through the concept of unified detachment although authors of the aforementioned OurRelationship programme (online version of IBCT) opted to individualise the process of self-reflection rather than encourage joint discussions that could erode partner acceptance.

### **2.13 Shared activities in CRE**

However, activities that encourage the development of a shared identity are crucial to fostering love and intimacy between partners at all stages of relationship development (Aron et al., 2000). Therefore, the REV programme emphasised that

watching the REV videos should be done together as a shared couple experience as well as encouraging joint couple discussions following each video. This decision was informed by a Scottish study finding that when couples watch media together (TV / films / video) they experience an improvement in relationship quality (Gomillion et al., 2017). The authors also found that shared media viewing increased a sense of shared identity between partners and resulted in couples feeling closer. Skerrett (2003, 2004) has used the term ‘we-ness’ to capture this feeling of closeness. The suggestion that shared media use can benefit relationship satisfaction is also evidenced in a study by Rogge et al. (2013) (discussed in more detail below), where participants who watched relationship-themed movies in a control condition experienced similar improvements to couples participating in a full programme of skills-based CRE. However, there is a lack of research examining whether it is the content or process of shared viewing that impacts improved relationship quality. It was therefore important that the present study was designed to distinguish between the impact of the content of the REV videos versus the process of viewing and discussing the videos. A condition was therefore incorporated where couples engaged in a shared relationship activity (SRA) that involved watching and discussing nature videos. This meant that differences could be compared between the REV, SRA and a wait-list control group (WLC) pre (T1) and post (T2) intervention (discussed further in the Methodology chapter).

## **2.14 Educational focus: skills versus relationship awareness**

Consideration was given to whether the REV videos should focus on relationship awareness (RA) or relationship skills given a current debate on the respective merits of each (Bradbury & Lavner, 2012; Rogge et al., 2013). CRE has traditionally drawn from behavioural theory and focused primarily on skills training, but there is a debatable link between changes in communication skills and changes in relationship satisfaction (Whisman & Snyder, 1997). Within this context, Snyder and Schneider (2002) argue that the important focus for CRE should be on RA rather than relationship skills training, although this does not mean that interpersonal skills are unimportant. Acitelli (2001) found that partners who are more aware of their relationships, and who identify strongly with the relationship, tend to make more effort to support and maintain the relationship. It has also been noted that couples with stronger relationship identity and awareness

are most likely to still be together after five years than couples with lower relationship awareness (Carrère et al., 2000).

This led Rogge et al. (2013) to specifically examine whether skills training is necessary in CRE by comparing outcomes in a control group (NT) with a single-session RA group and two groups engaged in intensive skills-based training (PREP & Couple CARE). The study focused on newly-wed / recently engaged couples and examined relationship dissolution over the three-year period following treatment. Results showed that the NT group experienced twice the level of relationship dissolution (24%) compared with the other three groups (11%), with no differences between the PREP, CARE and RA groups. This indicates that skills training may not be necessary to maintain relationship quality and that RA may provide an effective and cost-effective alternative. Rogge et al. suggested that this is because most individuals already possess the basic skills needed to develop a healthy, strong and fulfilling relationship but need motivation to deploy them in their intimate relationships over time. Indeed, there is some suggestion that skills-based programmes may be unhelpful to satisfied couples. An unintended effect of the skills-based programmes examined by Rogge et al. was that they appeared to sensitise satisfied couples to the skills they were intended to improve. The implications of these findings for the present study were two-fold. Firstly, they show that RA seems to be an effective intervention to support satisfaction in happy couples, and secondly, they suggest that RA can be effective following a single session. It is worth highlighting that the low-dose effect may have been amplified by a high level of contact with the programme psychologists. These findings informed the focus of the REV intervention onto RA rather than the traditional skills-based models of CRE.

## **2.15 Programme dose**

There is substantial variation in the dosage across different CRE programmes. A meta-analysis of 148 in-person CRE programmes identified dosages ranging from 1–20 hours (Hawkins et al., 2012) and found stronger effects were associated with high-dose (9–20 hours) compared with low-dose (1–8 hours) programmes. However, dosage requirements vary depending on level of pre-treatment distress (Bradford et al., 2017), with less distressed couples seeming to need lower dose interventions, and some CRE researchers have argued that even brief interventions can not only be effective but also cost-efficient from a health-

economics perspective (Halford et al., 2008). It is also likely that less motivated couples would be more likely to engage in a low-dose than high-dose intervention. In terms of online programme dosage, the Marriage Check-up, an assessment and feedback CRE targeted at high-risk couples, was found to generate improvements in intimacy, acceptance and relationship satisfaction based on four hours of CRE (Cordova et al., 2014) and the OurRelationship programme (Doss et al., 2016) generated improvements following eight hours of CRE. In their paper on best practice for CRE, Stanley et al. (2020) appraise the existing literature and argue there are pros and cons of different formats, concluding that decisions on dose and format should be guided by what seems best in a specific setting and with a particular population. This literature informed the structure and dosage of the REV to comprise three 15-minute modules (<1 hour CRE).

## **2.16 Theoretical underpinnings of the REV content**

The aim of the REV was to create content that would have relevance to couples across a broad spectrum in terms of relationship duration and different stages of the relationship life-cycle, across the spectrum of relationship satisfaction (from highly satisfied to highly distressed), across different relationship types (dating, co-habiting, married, second marriages), across different categories of couples (same-sex, heterosexual, polyamorous) and across different categories of individuals (age, gender, ethnicity, culture). To achieve this, the researcher looked to leading theories about relationships and in particular to social exchange theory (Kelley & Thibaut, 1978; Thibaut & Kelley, 1959). Social exchange theory was incorporated into early models of CRE that focused on optimising the ratio of positive to negative exchanges and on restoring a healthy ratio of positive exchanges in distressed couples (Jacobson & Margolin, 1979). Social exchange theory continues to underpin behavioural models of therapy such as IBCT and its online OurRelationship programme. There is a strong evidence base for these models of CRE (Christensen & Doss, 2017; Doss et al., 2016) and this provided one rationale for using social exchange theory as a theoretical foundation for the REV into which other approaches and ideas were assimilated.

**2.16.1. Social exchange theory.** Social exchange theory was originally developed by Homans (1958) and uses the language of economics to describe how individuals decide whether to persist in their relationships. Thibaut and Kelley

(1959) developed their own version of social exchange theory to specifically focus on intimate couple relationships. The theory draws on ideas from operant / radical behaviourism (Skinner, 1938) about rewards and punishments to describe the costs and benefits of social relationships and takes a nomothetic approach to studying relationships, trying to uncover universal laws of how relationships are maintained that have relevance to all couples. Social exchange theory proposes that individuals evaluate the outcome and adequacy of their intimate relationships based on whether the rewards outweigh the costs, and that satisfaction will be low(er) when costs outweigh rewards. However, social exchange theory does not simplistically reduce couple relationships to a process of tallying pros and cons. Thibault and Kelley suggested that individuals also compare their current relationship with their previous relationships and are more likely to feel satisfied and remain in a relationship when the current outcome (rewards minus costs) outweighs this comparison level (CL). Thibaut and Kelley also posited that individuals make similar comparisons between their present relationship and perceived alternatives (comparison level for alternative; CL<sub>alt</sub>). Comparison level is included in this review to provide an overview of social exchange theory but is not discussed further given its lack of focus in the present study or the REV, as CL / CL<sub>alt</sub> were not considered universally relevant targets for REV content.

A universally relevant programme of CRE needs to ensure that it is not biased towards any particular phase of relationship development. Thibaut and Kelley (1959) proposed four stages of relationship development: sampling (analysing the costs and rewards of entering the relationship); bargaining (testing the giving and receiving of rewards to see if the relationship is worth developing further); commitment (as attraction to partner increases and costs are perceived to reduce); and institutionalisation (where norms and expectations of rewards and costs are established and on-going). Whilst social exchange theory and this phased framework shows that stability and quality of relationships change over time (Lewis & Spanier, 1979; Spanier & Lewis, 1981) and explains how some couples stay in unsatisfying relationships (Rusbult & Martz, 1995), it is not able to explain within-couple variations over time and that contemporary couples often continue negotiating and re-negotiating their relationships (Van Hoof, 2016). Therefore, an aim of the REV is to help partners think together about the way they approach their present relationship and how the nature of their exchanges contributes to the way they feel in that relationship.

The application of social exchange theory to the REV was two-fold. Firstly, in informing that a key aim of the REV was that the experiential rewards for couples of participating in the programme should outweigh any costs. This aim is important in terms of securing adherence to the programme, but also in terms of securing participant endorsement for the programme over the long term to reduce stigma of CRE and encourage couples to stay engaged and to normalise the value of participating in CRE. Aforementioned evidence that the effect of CRE declines over time makes it likely that couples will be invited to engage in on-going refresher modules of CRE. Secondly, social exchange theory as well as self-efficacy theory (Bandura, 1977) underpinned the REV aim of getting partners to reflect on how their own behaviour contributes to the ratio of rewards and costs in the relationship, both for themselves and for their partner.

A key issue to consider when critiquing the relevance of social exchange theory is that it was developed in the 1950s when relationship roles, expectations and beliefs were markedly different to contemporary relationships that carry greater expectation of emotional closeness and romantic love (Somerville, 2000). A post-modern perspective on love and relationships also critiques whether social exchange theory is up to the job of explaining the diversity of contemporary Western relationships regarding relationship structure (co-habiting, marriage, living apart) and profile (sexuality, gendered roles; Stacey, 1998). More recent critiques might argue that polyamorous and extra-dyadic relationships clearly forgo cost-benefit thinking as an exclusive contract between two partners (Strassberg, 2003). The investment model of relationships (IMR) is now considered as a model that updates and operationalises social exchange theory.

**2.16.2. The Investment Model of Relationships.** The IMR (Rusbult, 1980a) developed from social exchange theory, with its major contribution being to introduce the role played by investments in how individuals evaluate their decision to persist in a relationship. By investments, Rusbult refers to historically established investments such as children, a shared home and friendship or support networks. Investment size refers to the degree and importance of the resources associated with the relationship, that would be lost or decline in value if the relationship were to end. However, this definition has been critiqued as oversimplistic by Goodfriend and Agnew (2008) who proposed that couples are also

compelled to remain in relationships through the loss of future or planned investments.

The key premise of the IMR (Rusbult, 1980a) is that increasing investment size, relationship satisfaction and quality of alternatives should in turn increase commitment level and thus the likelihood of an individual persisting in their relationship. The IMR has been empirically established as a particularly robust model for predicting commitment to maintaining romantic relationships in dating contexts (Rusbult, 1980a; 1983), friendships (Rusbult, 1980b), professional relationships (Farrell & Rusbult, 1981; Moon & Bonney, 2007; Rusbult & Farrell, 1983) and across both heterosexual and same-sex romantic relationships (Bui et al., 1996; Duffy & Rusbult, 1985-1986; Kurdek, 1991, 1995) and this provides the rationale for using the IMR to theoretically underpin the REV, with its aim of being relevant across a breadth of relationships.

Commitment has consistently been found to underpin successful relationships (Clements & Swensen, 2003; Robinson & Blanton, 1993) and an improvement in commitment has been found to be the most potent predictor of the amount of positive change in relationship quality (Rauer et al., 2014). Commitment was therefore selected as the focus for the first REV video. Selecting commitment for the first video was not only to convey to couples the importance of commitment to relationship outcomes but also to engage commitment to the CRE process from the outset.

To provide a mechanism by which couples could engage with the process of commitment, the first video drew on ideas from acceptance and commitment therapy (ACT; Hayes et al., 2011), a third wave behavioural model of therapy. The first video linked together two ACT processes, committed action and values, as ACT proposes that having clearly identified values is essential to engage committed action towards that valued direction. Most couples value a happy and mutually satisfying relationship (Halford, 2011; Snyder & Halford, 2012) and the ACT model encourages couples to focus on the committed actions required to head in this valued direction and thus improve relationship satisfaction (Harris, 2009). Creating a shared value statement for the relationship was therefore embedded into the first REV module along with education about the process of committed action to build a fulfilling relationship. An aim and associated proposition for the present study were as follows:

*Aim 1:* To examine the value of specifically targeting the process of commitment in a brief programme of CRE.

*Hypothesis 1:* There will be a greater improvement in commitment level between T1 and T2 for the REV group versus *a) the SRA and b) WLC groups.*

Whilst the IMR posits that commitment is the main predictor of persistence in a relationship, Rusbult et al. (1980a) considered investment size to be the most important factor maintaining commitment to the relationship. Stanley (2001) argues that CRE based on the IMR should target individuals' mind-sets, and so the focus of the second REV video was to engage a mind-set of investment in the relationship. This fits with Prochaska and DiClemente's (1983) trans-theoretical stages-of-change model which argues that you cannot change behaviour without first developing a mind-set that perceives and desires the need for change. Rationale for focusing on investment in the second video comes from a study by Bodenmann et al. (2006) which found that women are beneficially impacted when their male partner behaves in a way that actively suggests investment in the relationship, although notably this same impact is not noticed the other way around. Further rationale for focusing on investment comes from Solomon's (1994) theory of love that posits investment as the *practical work* of building and maintaining a relationship that in turn nurtures and maintains the experience of love.

The second REV video emphasised investment through the process of thinking as a couple and Skerrett's (2003, 2004) concept of 'we-ness'. We-ness refers to the extent to which a couple mutually invest in their relationship and in each other. We-ness has been found to be a strong predictor of relationship stability and resilience (Gottman, 2011; Skerrett & Fergus, 2015). Shared identity research has found that couples with a strong we-orientation experience greater relationship satisfaction as well as other physical and emotional benefits (Godwin et al., 2013; Kayser et al., 2007; Rohrbaugh et al., 2008, 2012). This suggests that the concept of investment as defined in the IMR (Rusbult, 1980a) may be too restrictive in focusing on future and past investments, and that greater emphasis is needed on an on-going, active and engaged mind-set of investment. These ideas about investment were embedded into the second video and were illustrated with a Lego metaphor,

drawing on the ACT concept of metaphors to emphasise learning processes (Foody et al., 2014). An aim of the present study and associated hypothesis were as follows:

*Aim 2:* To examine the value of specifically targeting the process of investment size in a brief programme of CRE.

*Hypothesis 2:* There will be a greater improvement in investment size between T1 and T2 for the REV group versus *a*) the SRA and *b*) WLC groups.

The aim of the third REV video was to target and increase feelings of emotional intimacy. Emotional intimacy is widely acknowledged as an important feature of close interpersonal relationships (Bartholomew, 1990; Goleman, 2001; Wood, 1984) and is considered a fundamental component of romantic relationships (Jankowiak & Fisher, 1992). Focusing on commitment level and investment size alone does not seem sufficient if one is interested in nurturing emotionally rewarding relationships (Caughlin & Huston, 2010; Rogge et al., 2006). In his triangular theory of love, Sternberg (1986) argues that intimacy is a central tenet of strong relationships and that relationships based on commitment but without intimacy and passion are empty and emotionally unfulfilling. The aim of the third video was, therefore, to draw on Sternberg's theory and to increase relationship satisfaction through enhancing feelings of emotional intimacy.

Evidence that CRE should target behaviours that foster emotional and sexual intimacy comes from a study with 335 married couples who attended the Flourishing Families Project. The results showed that within spouses (for each spouse), emotional and sexual intimacy mediated the association between spouses' appraisal of their partners' communication and their own relationship satisfaction (Yoo et al., 2014). Lack of emotional intimacy is also associated with low levels of relationship satisfaction and high levels of relationship dissolution (Kingsbury & Minda, 1988; Waring, 1988) and is a commonly cited complaint amongst couples attending therapy together (Doss et al., 2004; Lundblad & Hansson, 2006; Veroff et al., 1981).

The third video educated couples about the link between vulnerable self-disclosure and increased emotional intimacy and closeness. Evidence for this approach comes from research finding that self-disclosure and partner disclosure

enhanced feelings of emotional intimacy (Laurenceau et al., 1998). The results from this study provided strong empirical support for one of the main theories of emotional intimacy: the interpersonal process model (IPM) of intimacy (Reis & Patrick, 1996; Reis & Shaver, 1988) that is rooted in attachment theory (Bowlby, 1989). The other main theory on emotional intimacy is based on a behavioural interpretation of intimacy (Cordova & Scott, 2001). The difference between the two models is that the behavioural model emphasises the impact of punishing responses that lead to decreased feelings of intimacy, whereas the IPM suggests that a lack of responsiveness prohibits increases in intimacy but does not explain decreases in intimacy. An integration of both these models suggests that vulnerable disclosures, partners' responsiveness, reinforcement, punishment and how individuals perceive their partner responsiveness are all features of developing emotional intimacy. These ideas were embedded in the educational component of the third video, as well as informing the decision to incorporate post-video discussions into the programme structure. An aim of the present study was therefore:

*Aim 3:* To examine the value of specifically targeting the process of emotional intimacy in a brief programme of CRE.

In operationalising this aim, consideration was given to findings that disclosures revealing the highest level of vulnerability are the most likely to elicit high levels of partner responsiveness (Reis & Shaver, 1988; Roberts & Greenberg, 2002). Khalifian and Barry (2020) note that couples tend to communicate in this vulnerable way early in the relationship life-cycle to feel intimate and connected, but that this vulnerable discourse diminishes over time. This literature suggests that any self-disclosing discussions should result in improved feelings of emotional intimacy but that this will be less where discussions are neutral, such as following the nature videos (the SRA group), and higher amongst couples having more personal discussions following the REV videos. The assumed proposition was therefore:

*Hypothesis 3:* There will be a greater improvement in emotional intimacy between T1 and T2 for the REV group versus *a*) the SRA and *b*) WLC groups.

The literature evidenced to support focusing the REV programme content on commitment level, investment size and emotional intimacy also suggests that improvements in relationship satisfaction should be observed as a result. An aim of the present study and associated hypothesis was therefore as follows:

*Aim 4:* To examine whether targeting commitment level, investment size and emotional intimacy increases overall levels of relationship satisfaction.

*Hypothesis 4:* There will be a greater improvement in relationship satisfaction between T1 and T2 for the REV group versus *a*) the SRA and *b*) WLC groups.

## **2.17 Processes of change in CRE**

In addition to examining literature in order to shape the video content, literature was also examined in order to understand how to optimise the structure of the REV programme. There is very little research on the processes of change in CRE. However, drawing on social learning theory (Bandura & Walters, 1977), two main processes are incorporated into most CRE programmes. The first is the process of couple discussions and the second is an emphasis on behaviour change.

**2.17.1. Couple discussions.** In addition to the aforementioned literature on the benefit of vulnerable self and partner disclosure in fostering emotional intimacy, neurobiological research by Lieberman et al. (2007) further evidences the value of vulnerable couple discussions. In their study based on imaging data, Lieberman et al. found that talking about feelings helps to soothe the body's internal threat system, with fMRI showing reduced activation in the amygdala when individuals label their emotions. This literature provided the rationale for centralising intimate discussions in the REV programme structure. To encourage participants to talk about their feelings, open questions were posed at the end of each of the three REV videos and supplied on email for the SRA group. The questions were intended to facilitate an increase in positive feelings and drew on the principles of motivational interviewing (Miller & Rollnick, 2012).

**2.17.2. Behaviour change.** Behaviour change is consistent with the committed action process in ACT (Hayes et al., 2011), as conveyed in the first

video. Rauer et al. (2014) have found that aiming to increase the ratio of positive, affectionate behaviours is a key process of change in CRE. Whilst the emphasis of the REV intervention was primarily on changing mind-set regarding commitment, investment and emotional intimacy, a soft emphasis was also placed on behaviour change by encouraging individuals to voluntarily utilise what they had learned following each of the three video modules in terms of behaviour change. It was not the aim of the intervention to target specific behaviours, but to invite a general reflection on where individuals could usefully amend their behaviour for the benefit of the relationship.

A unifying theory of behaviour change is self-efficacy theory (Bandura, 1977), which argues that relationship self-change, self-reflection and goal setting all help improve long-term maintenance of relationship satisfaction (Halford, 2011). This is informed by research findings that self-change can predict relationship satisfaction (Halford, et al., 2007). An aim in the present study was therefore to understand whether couples engage with the suggestions regarding discussions and behaviour change and how they experience these processes.

## **2.18 Mixed methods approach to CRE research**

Including both qualitative research questions and quantitative aims and hypotheses requires mixing methods. Mixed methods evaluation of CRE is relatively uncommon, but warranted, given there is limited knowledge about processes of change (Halford, 2011; Wilson & Halford, 2008). A mixed methods study by Gambrel and Piercy (2015a, 2015b) evaluated a mindfulness-based programme of CRE for couples expecting their first child. The researchers found that men experienced significant improvements on quantitative measures of relationship satisfaction and mindfulness whereas no change was observed in their female partners. Whilst the quantitative measures suggested no proximal improvement in satisfaction amongst the female partners following the CRE, the qualitative data indicated that male partners would be more involved and supportive of their female partners through pregnancy and early motherhood as a result of the CRE programme. It therefore seems reasonable to hypothesise that relationship satisfaction as a result of this would be experienced more distally by the women. This mixed methods study provides a nuanced understanding of how males and females responded differently to the intervention and how these differences manifested in the quantitative measures. As mixed methods is a rare approach in

CRE research, the present study aimed to examine the value of mixed methods, as follows:

***Integrated mixed methods question 1:*** How and in what ways does combining quantitative and qualitative data provide a richer evaluation of the REV intervention than with either method in isolation?

A further aim of mixing methods in the present study was to better understand whether the online self-directed approach addressed issues already outlined with regard to stigma and help-seeking. It is anticipated that the self-directed format of the REV intervention should address the desire of couples to feel autonomy over their relationship and the act of completing the intervention in the privacy of their own homes should reduce feelings of stigma. The specific question with regard to this aim was as follows:

***Integrated mixed methods question 2:*** How feasible is the intervention in terms of adherence to the programme?

Another aim of the present study was to examine any attitudinal barriers to participating in the programme and how individual preconceptions compared with the actual experience of participation. Previously discussed gender differences and more recent suggestions that gender may be important in how individuals engage with CRE (Van Acker, 2008; Wadsworth & Markman, 2012) led to this being examined for both male and female participants, as follows:

***Integrated mixed methods question 3:*** How and in what ways is the REV intervention considered acceptable by both male and female partners?

## **2.19 Conclusion of research aims, hypotheses and research questions**

This chapter has discussed and critiqued a broad range of literature from research into relationships, relationship education and the theory and models of therapy that have informed the development of the present REV intervention. As far as the researcher is aware, the REV is the first CRE programme specifically designed to be universally relevant and delivered online as a low-dose entry-level module that couples can complete together at home. In light of this, the overarching

aim of this study was to evaluate the feasibility, acceptability and effectiveness of the low-dose, online REV intervention as a universally relevant relationship awareness intervention to support couple relationships, as follows:

***Overarching research question:*** How and in what ways is the brief REV programme feasible, acceptable and effective as a universal intervention to support and improve couple relationships?

For completeness, the research aims, questions and hypotheses outlined in this chapter, along with their supporting theory and literature, are summarised in Table 2.1 below.

**Table 2.1**

*Summary of research aims, hypotheses, research questions & supporting literature*

<b>Study Aims</b>	<b>Hypotheses / Research Questions</b>	<b>Key supporting literature</b>
<i>Overarching aim:</i> To evaluate the feasibility, acceptability and effectiveness of the low dose, online REV intervention as a universally relevant and effective relationship awareness (RA) intervention to support couple relationships.	<i>Overarching research question:</i> How and in what ways is the brief REV programme feasible, acceptable and effective as a universal intervention to support and improve couple relationships?	Online: Doss et al. (2016) Flexible: Halford et al. (2004) No trainers: Bodenmann et al. (2014) RA as universal focus: Rogge et al. (2013) Dose: Cordova et al. (2014)
<i>Aim 1:</i> To examine the value of specifically targeting the process of commitment in a brief programme of CRE.	<i>Hypothesis 1:</i> There will be a greater improvement in commitment level between T1 and T2 for the REV group versus <i>a</i> ) the SRA and <i>b</i> ) WLC groups.	Social exchange theory (Kelley & Thibaut, 1978; Thibaut & Kelley, 1959); The IMR (Rusbult, 1980a)
<i>Aim 2:</i> To examine the value of specifically targeting the process of investment size in a brief programme of CRE.	<i>Hypothesis 2:</i> There will be a greater improvement in investment size between T1 and T2 for the REV group versus <i>a</i> ) the SRA and <i>b</i> ) WLC groups.	Social exchange theory (Kelley & Thibaut, 1978; Thibaut & Kelley, 1959); The IMR (Rusbult, 1980a)
<i>Aim 3:</i> To examine the value of specifically targeting the process of emotional intimacy in a brief programme of CRE.	<i>Hypothesis 3:</i> There will be a greater improvement in emotional intimacy between T1 and T2 for the REV group versus <i>a</i> ) the SRA and <i>b</i> ) WLC groups.	The interpersonal process model (IPM) of intimacy (Reis & Shaver, 1988; Roberts & Greenberg, 2002)
<i>Aim 4:</i> To examine whether targeting commitment level, investment size and emotional intimacy increases overall levels of relationship satisfaction.	<i>Hypothesis 4:</i> There will be a greater improvement in relationship satisfaction between T1 and T2 for the REV group versus <i>a</i> ) the SRA and <i>b</i> ) WLC groups.	Social exchange theory (Kelley & Thibaut, 1978; Thibaut & Kelley, 1959); The IMR (Rusbult, 1980a)
	<i>Qualitative research question:</i> What are the experiences of individuals participating in the REV programme?	Whisman et al. (2008)
	<i>Integrated mixed methods question 1:</i> How and in what ways does combining quantitative and qualitative data provide a richer evaluation of the REV intervention than with either method in isolation?	Gambrel & Piercy (2015a; 2015b); Whisman et al. (2008)
	<i>Integrated mixed methods question 2:</i> How feasible is the intervention in terms of adherence to the programme?	MRC guidelines (2000) + 2008 & 2019 updates (Craig et al., 2008; O'Cathain et al., 2019)
	<i>Integrated mixed methods question 3:</i> How and in what ways is the REV intervention considered acceptable by both male and female partners?	

## **Chapter 3. Methodology**

### **3.1 Introduction**

The previous chapter concluded with the research aims and questions guiding the present study and, informed by the philosophical stance of pragmatism, these questions and aims have shaped the methodology for this current research study. The first section of this methodology chapter provides a purpose statement, methodological overview, description of the study materials and associated theoretical underpinnings. The central section of the chapter details the different elements of the methodology, including participants, demographics, sampling, recruitment, sample power, procedures, data collection and data analytic strategies. The final section of the chapter concludes with considerations of ethics and an evaluation of methodological issues.

### **3.2 Purpose statement (reason for conducting the research)**

The overarching research question for the present study was: How and in what ways is the brief relationship education video (REV) programme feasible, acceptable and effective as a universally relevant intervention to support and improve couple relationships? The study approach reflected MRC (2000) guidelines and more recent updates (Craig et al., 2008; O'Cathain et al., 2019) for early phase development of a complex healthcare intervention. To optimise insight on feasibility, the study evaluated the intervention across a breadth of couples with regard to age, relationship type, sexuality, ethnicity and relationship duration. The social need for the REV is underpinned by the high social and personal cost of relationship breakdown (Van Acker, 2008) and the lack of available, accessible and universally acceptable couple and relationship education (CRE) in the UK (Relationships Alliance, 2017).

### **3.3 Methodology overview**

A methodology overview is shown in Figure 3.1 (below). The research design was a concurrent equal-status mixed methods design (Johnson & Christensen, 2011; Schoonenboom & Johnson, 2017) notated as QUAN+QUAL (Morse, 2003). This design involved collection of experimental quantitative data in

the form of two online / postal surveys conducted approximately three to four weeks apart (time one; T1 and time two; T2), immediately followed by the collection of qualitative data in the form of self-recorded audio interviews. The rationale for the mixed methods design was three-fold: complementarity, expansion and triangulation. The study compared three conditions, the REV group, a shared relationship activity (SRA) group and a wait-list control (WLC) group. Intervention feasibility and acceptability were examined using a mixed qualitative content analysis integrated with numerical analysis of recruitment and adherence data. Effectiveness was operationalised as the extent to which each participant felt satisfied, invested and committed in their relationship, and the extent to which they experienced emotional intimacy with their partner. Quantitative analysis was conducted on SPSS using a three-way mixed ANOVA analysing changes between T1 and T2 on levels of relationship satisfaction, investment size, commitment level and emotional intimacy between the REV, SRA and WLC groups. The qualitative interview guide (Appendix J) explored participants' experiences of the programme along with perceptions of its usefulness, effectiveness and ideas for improvements. The qualitative analysis was conducted using thematic template analysis (King, 1998). Some data integration occurred during analysis through joint display and data transformation but the main point of data integration was at the point of interpretation and discussion (Chapter 6).

### 3.4 Materials

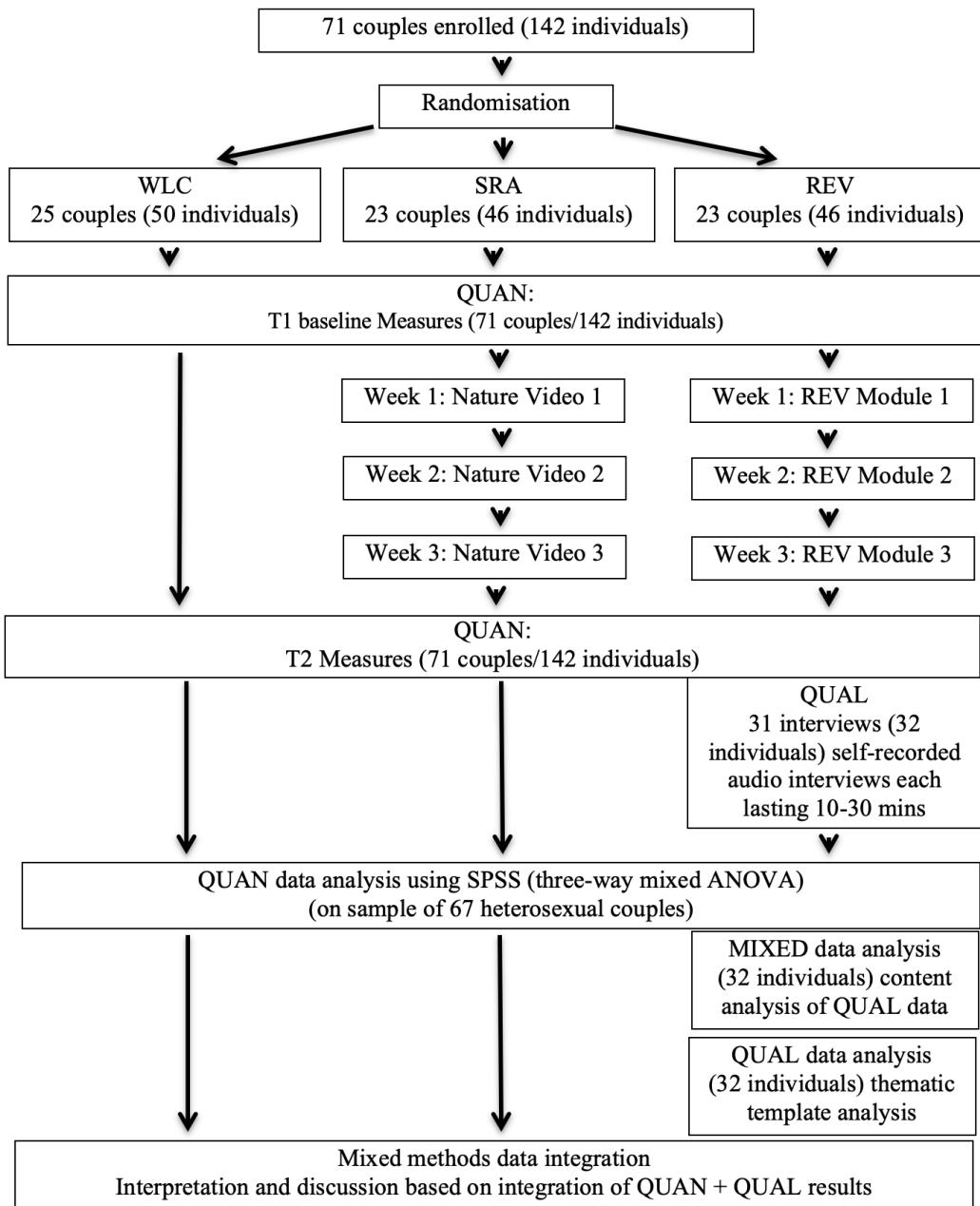
**3.4.1. The REV intervention.** The REV was developed by the lead-researcher in her clinical practice as a couple therapist. As previously discussed in the literature review (Chapter 2), various pragmatic assumptions relating to relationship satisfaction, commitment, investment and emotional intimacy were embedded within the videos. These assumptions were based on the literature, but also informed by the therapist's clinical experience of utilising acceptance and commitment therapy (ACT; Hayes et al., 2011) to help couples work through the discrepancy between their relationship values and their behaviour towards each other. The intervention is delivered in three modules covering commitment (video one), investment (video two) and emotional intimacy (video three), with each video lasting 15–17 minutes. Each module comprises three elements: a video that is watched by the couple together as a shared activity; a subsequent discussion about

their thoughts and feelings; and finally, a light emphasis on behaviour change. The video format is a close-up of the presenter sitting at a desk in a neutral environment talking straight to camera. There were no scripts for the videos; the presenter talked on a series of pre-determined points (see Appendix A). Table 3.1 conveys the key content and discussion points for each of the three videos. The previous chapter has reviewed the literature underpinning development of the REV and the present study. For completeness and easy reference, Table 3.2 (below) summarises the different theories and literature informing the various elements of the REV.

**3.4.2. The SRA intervention.** The purpose of incorporating the SRA group into the research design was to evaluate the role played by the process of watching and discussing three videos together as a couple, as distinct from the content of those videos and discussions. Three short nature videos were selected for this group that avoided any controversial, political or distressing content to optimise the chance that the couples had a positive experience when watching them. The length of the three SRA videos was necessarily shorter than the REV videos due to a lack of publicly accessible videos of equivalent length that were not overtly political, controversial or distressing. The three SRA videos were a gorilla video (3.23 minutes), a video on emperor penguins (5.17 minutes) and a video of beautiful scenery (5.55 minutes).

**Figure 3.1**

*Methodology overview for the concurrent equal-status QUAN+QUAL mixed methods study*



**Table 3.1***Overview of REV content and discussion points*

Video	Key video content	Key discussion points
One (16:46 minutes)	This video encourages the couple to think about what relationships are and how they are created. It presents the idea that relationships are created by the two partners in the space between them and through their behaviour and the way that they relate to each other. It uses the three pieces of paper metaphor (Me-You-Us) as well as the Cinderella metaphor. The Cinderella metaphor retells the story of how the couple lived happily ever after through the hard work they put into their relationship. A case study is also presented of two behavioural psychiatrists who decide to behave as if they love each other and then find their love rekindles.	The video concludes with the suggestion that couples discuss their thoughts and feelings about the ideas presented in video one and, if they wish, to develop a shared value statement for their relationship. Specific discussion prompts were: <ul style="list-style-type: none"> <li>• What kind of relationship are you as a couple trying to create?</li> <li>• What changes might this need you to make if you are committed to this process?</li> </ul>
Two (15:20 minutes)	This video introduces the idea that we need to invest in our relationships in the same way that we might invest in other important areas of our lives (work, children, friends, family, hobbies etc.). The economic argument is presented – that we need to pay into the relationship if we want it to pay out in terms of relationship satisfaction. Consideration is given to barriers that stop us. Consideration is also given to different ways in which we can invest in relationships (time, energy, decisions, behaviour etc.). This point is illustrated with the Lego® brick metaphor (building a relationship is like building with Lego® – think about whether you're putting a Lego® brick on or taking one off).	The video concludes with the suggestion that couples discuss their thoughts and feelings about the ideas presented in video two and how they can more actively invest in their relationship. <ul style="list-style-type: none"> <li>• Which of the ideas do you think can be most useful to you as a couple?</li> <li>• How could you use these ideas to improve your relationship?</li> <li>• What are your strengths?</li> <li>• How can you work on the areas that are not so strong?</li> </ul>
Three (16:49 minutes)	This video presents the idea that intimacy is created through open, honest and vulnerable communication. Difficulties in communication are discussed (wanting to <i>win</i> arguments, needing to be right, not being able to see both perspectives). The idea of <i>problems as problems</i> is discussed, to help the couple think about difficulties as issues of difference that need to be resolved. The ‘building a flat pack’ metaphor is used to help couples understand the process of problem solving from a couple perspective and also to support the idea that differences can be celebrated rather than problematised or personalised.	The video concludes by inviting couples to discuss their thoughts and feelings about the ideas presented in video three, and in particular to discuss their differences, strengths and feelings of vulnerability. <ul style="list-style-type: none"> <li>• What is it like to talk to each other in your relationship?</li> <li>• What are you good at talking about, and why is that?</li> <li>• Where do you struggle with emotionally intimate communication and might you need some support?</li> </ul>

**Table 3.2***The REV intervention and supporting theory*

<b>Study Aims</b>	<b>Key issue / message</b>	<b>Supporting evidence</b>	<b>Key supporting research, literature and theory</b>
Joint, couple participation	Relationships need dyadic focus	Outcomes greater when couples attend together	Adler-Baeder et al. (2010)
Online format	Increase reach of programme through greater accessibility, acceptability and lower cost	Online CRE has comparable effect to FTF counterparts Online IBCT effective in OurRelationship programme These effects lasting for up to four years	Zemp et al. (2017) Doss et al. (2016) Doss et al. (2019)
Relationship awareness (RA) rather than skills focus	Couples have the basic skills but need motivation to deploy them	Re-evaluate skills focus in CRE Romantic movies can be as effective as skills-based CRE	Bradbury & Lavner (2012) Rogge et al. (2013)
Universal / broad appeal	Focus on core relationship processes	Need for universal CRE programme in the UK CRE accessed by both happy and distressed couples Relationship processes outlined in the IMR has been found to be present across couple types	Relationships Alliance Manifesto (2017) Hawkins et al. (2008) Bui et al. (1996); Duffy & Rusbult (1985-1986); Farrell & Rusbult (1981); Kurdek (1995); Moon & Bonney (2007); Rusbult & Farrell (1983)
Shared viewing experience	Value of shared activity	Shared activity research Shared media use enhances relationship quality Enhancing we-ness Watching romantic movies	Aron et al. (2000) Gomillion et al. (2017) Skerrett (2003, 2004) Rogge et al. (2013)
Low dose	Three short doses over three weeks	Low dose RA had similar outcomes to higher dose CRE Two session marriage check-up improves outcomes Decide based on population	Rogge et al. (2013) Cordova et al. (2014) Stanley et al. (2019)
Video one	Focus on commitment level	Committed action (Me-You-Us)	The IMR (Rusbult, 1980a) ACT (Hayes et al., 2011)
Video two	Focus on investment size	Investment is a daily, on-going process (Lego® metaphor)	The IMR (Rusbult, 1980a) Solomon's (1994) theory of love
Video three	Focus on emotional intimacy	Importance of emotional intimacy Links between emotional intimacy and relationship outcomes	Reis & Shaver (1988); Sternberg's (1986) triangular theory of love Kingsbury & Minda (1988); Waring (1988); Yoo et al. (2014)
Post-video discussion	Discussions aid feelings of closeness	Vulnerable self-disclosure and partner disclosure increases intimacy	Khalifian & Barry (2020); Laurenceau et al. (1998); Lieberman et al. (2007); Reis & Shaver (1988); Roberts & Greenberg (2002)
Emphasis on personal behaviour change	To increase positive, pro-relationship behaviours	Increase self-reflection / self-efficacy / self-responsibility Behaviour change influences relationship mind-set Behavioural theory and operant conditioning	Self-efficacy theory (Bandura, 1977); Halford et al. (2007) Rauer et al. (2014) Skinner (1938)
No trainer support	Stand-alone CRE without a trainer	No difference in efficacy of self-administered CRE without trainer	Bodenmann et al. (2014)

### **3.5 Philosophical worldview: pragmatism**

This research is viewed through the philosophical lens of pragmatism. Pragmatism evolved in mid-19th century America through the work of Charles Peirce (1992–94, vol. II) and William James (1904) to break free from the philosophical traps about how to conceive and measure truth. Pragmatism is hailed as the foundation of mixed methods research (MMR; Tashakkori & Teddlie, 1998, 2003) but unlike other philosophies, pragmatism avoids ontological questions about the nature of truth and reality by rejecting a distinction between realism and anti-realism (Morgan, 2007).

Pragmatism conceives and measures truth through the results found in experience (Campbell, 1996; Morgan, 2014); if something works in experience then it is considered true through the pragmatic lens. The ontology of pragmatism thus accommodates diverse viewpoints about social realities, and its epistemology is practical; both objective and subjective perspectives are valuable, depending on what works for the purpose and stage of the research cycle (Creswell, 2013; Teddlie & Tashakkori, 2009). Pragmatism sidesteps epistemological and methodological dichotomies by positioning the research problem rather than methods at the centre of the research process (Feilzer, 2010; Johnson & Onwuegbuzie, 2004). Whilst both objective and subjective approaches are valued, they are nonetheless to be executed in ways underpinned by their exclusivist paradigms (Morse, 2003).

The quantitative arm of the present mixed methods study emphasised the collection of self-report and quantifiable data that is underpinned by a positivist epistemology. The study variables were operationalised using measures with robust psychometric properties and the statistical analyses facilitated examination of relationships and differences between variables. The ontology of positivism reflects the belief that there is a single and universal truth that can be epistemologically observed and measured through the scientific method. The axiology of positivism focuses on explanation and the production of value-free research, where the researcher is neutral and retains an objective, detached stance. Positivism is critiqued from a post-positivist perspective for its emphasis on the status quo and for lacking insight and nuance with regard to in-depth and complex issues (Alvesson & Skoldberg, 2009) such as relationships.

The qualitative arm of the present study emphasised the collection of data about how participants subjectively experienced the REV intervention and this approach is underpinned by a post-modern constructivist paradigm. The ontology

of constructivism is informed by the belief that all scientific theories are socially determined and that there are multiple realities, thereby leaving no place for the philosophy of positivism. The axiology of constructivism is based on the understanding and notion that individual values are honoured and interpersonally negotiated. This axiology is inherently value-laden, with the researcher positioned within the process of knowledge creation rather than being independent from the research and data obtained. A strength of constructivism is that it allows for multiple perspectives but it can be critiqued for not being critical of these differing realities (Lee, 2012) and thus its associated qualitative research methods are critiqued for lacking the power to influence social policy (Tierney & Clemens, 2011).

Pragmatism employs both qualitative and quantitative methods in the service of finding practical solutions to practical problems. Pragmatism is a philosophy that is interested in what works (Creswell, 2013) and in generating socially and politically influential and actionable knowledge (Dolbin-MacNab et al., 2014; Gambrel & Butler, 2013; Greene & Hall, 2010; Morgan, 2007). However, pragmatism receives criticism for lacking adherence to a particular or exclusive theoretical position (Jackson, 1999; Lipscomb, 2011), although Ormerod (2006) argues that pragmatism acknowledges the individual psychological nature of meaning but positions theory in the service of practice.

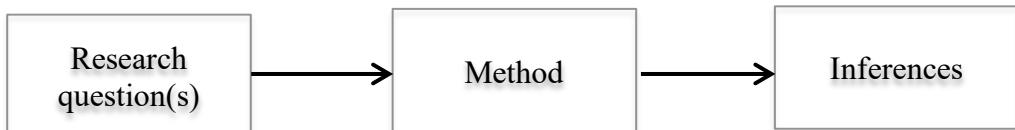
### **3.6 Mixed methods research**

MMR is considered appropriate to research the complex issues of outcome and process in marital and family therapy (MFT), with both quantitative and qualitative methods often being necessary to answer the research question (Dolbin-MacNab et al., 2014). MMR addresses the philosophical challenge of combining positivist and constructivist epistemologies by placing the emphasis on what works, whilst maintaining the epistemological integrity of both qualitative and quantitative components (Bishop, 2015; Bryman et al., 2008; Morse 2003; Yardley & Bishop, 2008). MMR synergistically combines the collection and/or analysis of both quantitative and qualitative data into a single study to more comprehensively explore the research problem (Creswell, 2013). Data in MMR is collected concurrently or sequentially and a defining feature of MMR is that data from different methods is integrated at one or more points in the research process

(Creswell et al., 2003). The research process in MMR is driven by the research question (Clark & Ivankova, 2015), as shown in Figure 3.2.

**Figure 3.2**

*Mixed methods research process*



Despite acknowledgement of MMR as a legitimate stand-alone research design in counselling psychology (Hanson et al., 2005), it is still less widely used in counselling research than singular methods (Leech & Onwuegbuzie, 2011) and despite its utility, only 1.3% of marital and family therapy (MFT) studies utilise MMR (Gambrel & Butler, 2013). Reasons may include unfamiliarity with the paradigm, misunderstandings about its value, resistance to new alternatives, difficulties defining MMR and specific challenges integrating data from two approaches (Smith, 2012).

### 3.7 Research design

The present study is a concurrent equal-status mixed methods study notated as QUAN + QUAL (Johnson & Christensen, 2011; Schoonenboom & Johnson, 2017). Participants were randomly assigned to one of three conditions: the intervention group (REV); the shared relationship activity group (SRA); and the wait-list control (WLC) group. The study was conducted in two parts. Part one was an experimental design where all participants completed two sets of quantitative measures at time one (T1) and time two (T2), with an interval of three to four weeks between T1 and T2. Part two was a qualitative design that involved participants in the SRA and REV conditions completing short audio self-recordings to capture their experience of watching and discussing the videos. Participants were instructed to complete this audio interview as soon as possible after completing their T2 questionnaire.

**3.7.1. Part one: The quantitative design.** Part one was an experimental design, specifically a mixed factorial design. The first factor was a between-participants group factor, whereby participants were randomly allocated to either

the REV, SRA or WLC group. The second factor was a within-participants time factor, whereby data was collected at baseline (T1) and three to four weeks later (T2). The four dependent variables (measured at T1 and T2) were relationship satisfaction, commitment level, investment size and emotional intimacy.

**3.7.2. Part two: The qualitative design.** Part two of the research study was comprised of self-directed audio-recorded Dictaphone interviews using a structured discussion guide with all individuals in the REV group. The focus of the interview was on understanding the experiences of individuals participating in the intervention. The interview duration was at the discretion of the interviewee and interviews ranged from 10–30 minutes.

### 3.8 Participants, sampling and recruitment

Figure 3.3 (below) shows that a total of 73 couples (146 individuals) consented to participate and completed T1 measures. However, two couples withdrew to take up their first counselling appointment before completing T2 measures. The final sample comprised 71 couples (142 individuals). Participants were recruited from two sources, 34 from the Relate<sup>1</sup> waiting list (couples waiting for their first couple therapy appointment) and 37 from the broad population of as found couples<sup>2</sup> (AF; couples not seeking help for their relationship). Table 3.3 shows the demographics of the final sample. As reported in Section 4.2, the AF and Relate samples were compared using t-tests and Chi square and no significant or noteworthy demographic differences were observed between the two samples on any of the criteria listed in Table 3.3.

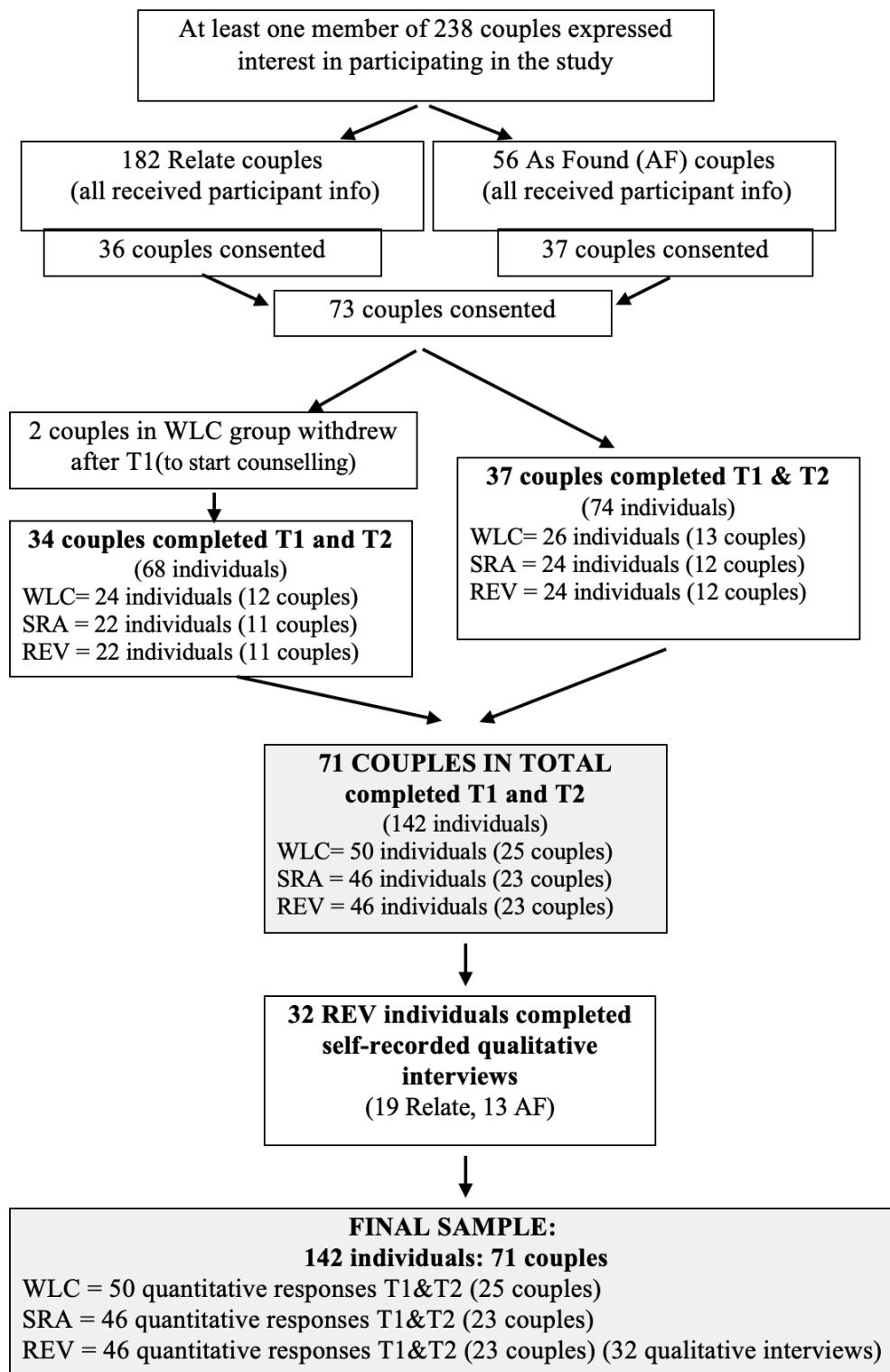
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<sup>1</sup> Relate is the leading UK relationship charity.

<sup>2</sup> As Found (AF) refers to couples who are found in the broad population but who are not engaged in any form of relationship help. These couples could be expected to be less distressed or (if distressed) to be resistant to accessing relationship support services.

**Figure 3.3**

*Recruitment and attrition rates through the research process*



**Table 3.3**  
*Sample demographics*

		Total sample
	N	(%)
Gender		
Male	74	(52.1%)
Female	68	(47.9%)
Ethnicity		
White	124	(87.3%)
Asian	9	(6.3%)
Black	2	(1.4%)
Mixed race	2	(1.4%)
Other	5	(3.5%)
Relationship status		
Married	88	(62.0%)
Co-habiting	40	(28.2%)
In a relationship, not living together	12	(8.5%)
Civil partnership	2	(1.4%)
Sexuality		
Heterosexual	127	(89.4%)
Gay/Lesbian	6	(4.2%)
Bisexual	5	(3.5%)
Not disclosed	4	(2.8%)
Age		
20-30	25	(17.6%)
31-40	39	(27.5%)
41-50	31	(21.8%)
51-60	26	(18.3%)
61-70	21	(14.8%)
Relationship duration		
2 years or below	14	(9.9%)
3-5 years	22	(15.5%)
6-10 years	28	(19.7%)
11-20 years	36	(25.4%)
21-30 years	24	(16.9%)
Over 30 years	18	(12.7%)

*Note:* N=142

Four Relate centres participated in the recruitment, selected to represent geographical and socio-economic diversity (London NW & Hertfordshire, Surrey, Nottingham, Hull & East Yorkshire). As far as possible, AF participants were recruited to mirror similar diversity. Recruitment of the Relate couples followed completion of the standard Relate intake assessment along with a brief screening questionnaire to exclude high-conflict couples (Appendix B). Suitable couples were given a numbered information pack containing the participant information sheet (Appendix E), consent form (Appendix F) and explicit consent form (Appendix G). The explicit consent form enabled information to be collected on gender, sexuality, age, ethnicity, relationship status and relationship duration in order to contextualise responses and evaluate the scope of acceptability, feasibility and effectiveness. Recruitment of the AF couples was based on purposeful snowball sampling through the researcher's friends, family, colleagues and acquaintances who were provided with instructions (Appendix C) and an invitation letter for potential participants (Appendix D). No couples known to the researcher were included in the study and couples presently engaged in couple therapy were excluded. Having read the participant information sheet, participants had the opportunity to contact the researcher directly with any questions.

Couples volunteering to participate had the option of consenting to the study online (Qualtrics) or by posting back the signed consent and explicit consent forms. Participation required consent from both partners in the couple. The majority of couples (73%;  $n=52$ ) completed their consent and responses on Qualtrics, the remainder (27%;  $n=19$ ) by post. Following consent, participants were randomly assigned to one of the three conditions (25 WLC, 23 SRA, 23 REV). This was facilitated by the randomisation feature on Qualtrics, and manually for postal surveys (randomly allocated using pre-determined rotation in order that consent forms were received). Participants were not able to select or alter their allocation.

### **3.9 Quantitative data collection**

The quantitative and qualitative data collection were independent of each other but ran concurrently during a single stage of research. The quantitative survey data was collected first, immediately followed by collection of the qualitative audio recordings.

**3.9.1. Quantitative measures.** Four constructs of interest were measured in this research using the following measures that were administered twice to each couple at baseline/T1 and post-intervention/T2 (3–4 weeks later). Unless otherwise stated, they are 9-point Likert scales (from 0=do not agree at all to 8=completely agree). The full list of scales / items and Cronbach's alphas are presented in Table 3.4.

**3.9.1.1. Commitment level.** Commitment level was measured with the seven-item commitment level scale from the global level investment model scale (IMS; Rusbult et al., 1998). Each item was rated on a nine-point Likert scale (0–8, with higher scores indicating greater commitment). The measure had excellent internal consistency in the current study (T1:  $\alpha = .93$ ; T2:  $\alpha = .94$ ).

**3.9.1.2. Investment size.** Investment size was measured with the five-item investment size scale from the global level IMS (Rusbult et al., 1998). Each item was rated on a nine-point Likert scale (0–8, with higher scores indicating greater investment). The measure had acceptable to good internal consistency in the current study (T1:  $\alpha = .77$ ; T2:  $\alpha = .81$ ).

**3.9.1.3. Relationship satisfaction.** Relationship satisfaction was measured with the five-item relationship satisfaction scale from the global level IMS (Rusbult et al., 1998). Each item was rated on a nine-point Likert scale (0–8, with higher scores indicating greater relationship satisfaction). The measure had excellent internal consistency in the current study (T1:  $\alpha = .95$ ; T2:  $\alpha = .96$ ).

**3.9.1.4. Emotional intimacy.** Emotional Intimacy was measured with five items from Sinclair and Dowdy's (2005) emotional intimacy scale. Each item was rated on a five-point Likert scale (1–5, with higher scores indicating greater emotional intimacy). The measure had good to excellent internal consistency in the current sample (T1:  $\alpha = .89$ ; T2:  $\alpha = .92$ ).

**Table 3.4***Experimental Study Variables*

Variable / scale	Item	Cronbach's alpha
Relationship satisfaction (IMS; Rusbult et al., 1998)	Item 1: I feel satisfied with our relationship Item 2: My relationship is much better than others' relationships Item 3: My relationship is close to ideal Item 4: Our relationship makes me very happy Item 5: Our relationship does a good job of fulfilling my needs for intimacy, companionship etc.	$\alpha = .94$ (Rusbult et al., 1998)
Investment size (IMS; Rusbult et al., 1998)	Item 1: I have put a great deal into our relationship that I would lose if the relationship were to end Item 2: Many aspects of my life have become linked to my partner (recreational activities, etc.) and I would lose all of this if we were to break up Item 3: I feel very involved in our relationship – like I have put a great deal into it Item 4: My relationships with friends and family members would be complicated if my partner and I were to break up E.g. partner is friends with people I care about Item 5: Compared to other people I know, I have invested a great deal of time in my relationship with my partner	$\alpha = .84$ (Rusbult et al., 1998)
Commitment level (IMS; Rusbult et al., 1998)	Item 1: I want our relationship to last a very long time Item 2: I am committed to maintaining my relationship with my partner Item 3: I would not feel very upset if our relationship were to end in the near future Item 4: It is likely that I will date someone other than my partner within the next year Item 5: I feel very attached to our relationship – very strongly linked to my partner Item 6: I want our relationship to last forever Item 7: I am oriented toward the long-term future of my relationship (for example, I imagine being with my partner several years from now)	$\alpha = .91$ (Rusbult et al., 1998)
The emotional intimacy scale (Sinclair & Dowdy, 2005)	Item 1: This person completely accepts me as I am Item 2: I can share my deepest thoughts and feelings with this person Item 3: This person cares deeply for me Item 4: This person would be willing to help me in any way Item 5: My thoughts and feelings are understood and affirmed by this person	$\alpha = .91$ (Sinclair & Dowdy, 2006)

*Note:* Cronbach's alpha scores on the above measures are reported for the present study in Section 4.2.2.

### **3.10 Quantitative procedure**

Following consent, all participants completed T1 measures simultaneously but confidentially from their partner. In the postal version of the study this was achieved by simultaneously posting questionnaires separately to each partner, with each returning their completed questionnaire in their own reply-paid envelope within 48 hours. For those completing the survey on Qualtrics, an email was sent to both partners simultaneously with instructions to log on together using either version of the link. Either partner could access the survey but they were required to confirm they were both present and logged on together. Once they had read the instructions together, each partner in turn confirmed that they were alone and completed their own T1 questionnaire confidentially without their partner present. Following completion of both their T1 questionnaires, couples in the REV group received an email link to the first REV video along with instructions to watch and discuss it together as a couple within 48 hours of receipt. The same email was sent to both partners and the link could be accessed from either email. The REV videos were held on a private Vimeo account. Following completion of T1 questionnaires, couples in the SRA group also received an email link to the first nature video. The procedure was the same for the SRA group as for the REV group. The nature videos were free-access YouTube videos. There was no correspondence with the WLC group between T1 and T2.

At the end of three weeks all partners received an email (or postal questionnaire) with the T2 questionnaire along with instructions for this to be completed within 48 hours. As with the T1 questionnaires, postal surveys were simultaneously sent individually to each partner and returned in their own reply-paid envelope. For those on Qualtrics, an email was sent simultaneously to both partners along with instructions to log on together using one version of the link. Either partner could access the survey but confirmation was required that both partners were logged on together. Once they had read the instructions together, each partner in turn confirmed that they were alone before completing their own T2 questionnaire confidentially without their partner present. Text and email reminders were sent to couples that had not completed T2 questionnaires within four weeks of T1. Whilst the majority of couples completed within this time frame, some (6.3%;  $n=9$ ) did not complete until week five.

Immediately following T2 measures, participants in the SRA and REV groups self-reported which video(s) they had watched together, separately or not at

all, which videos they discussed (and for how long) and whether they tried doing anything differently following each module (see Appendix J).

### **3.11 Qualitative data collection**

The self-administered qualitative interview guide can be found in Appendix K. REV participants each confidentially and independently completed the self-recorded audio interview, which explored their individual experiences of participating in the intervention. Specific prompts invited participants to describe their overall experience of the programme, any differences they had noticed as a result of participating, what they had found helpful and unhelpful, what they thought they would remember from the programme in a year's time and what improvements they would suggest. There were also prompts on the specifics of viewing videos, and on discussions and behaviour change.

### **3.12 Qualitative procedures**

Following completion of the T2 questionnaire, participants in the REV and SRA groups completed Section 1 of the self-administered questionnaire to record engagement with each stage of video watching, discussions and behaviour change. REV participants were then invited to complete a short self-recorded audio interview about their experience of participating in the programme. Participants were free to record for as long as felt appropriate, although a guideline of 10–30 minutes was suggested. The mean interview length was 12.8 minutes, with no differences between males and females. Each participant was given the option of recording on their own device and uploading the audio file directly into Qualtrics or alternatively receiving a password-protected Dictaphone through the post with a reply-paid envelope. A total of 32 REV participants completed interviews, with 41% ( $n=13$ ) recording on the Dictaphone and 59% ( $n=19$ ) recording on their own device. All qualitative interviews were completed within a maximum of ten days following T2. Following completion of T2 questionnaires, all participants in the WLC and SRA groups received the REV videos to watch in their own time.

**3.12.1. Recordings.** The researcher listened to all self-recorded interviews within a maximum of 48 hours of receipt, and most within 24 hours. This time frame was to ensure that any negative or distressing feedback could be attended to (i.e. mental health issues, safeguarding risks or concerns about domestic violence).

However, no such material was noted and no participants required follow-up contact as a consequence of their interview content.

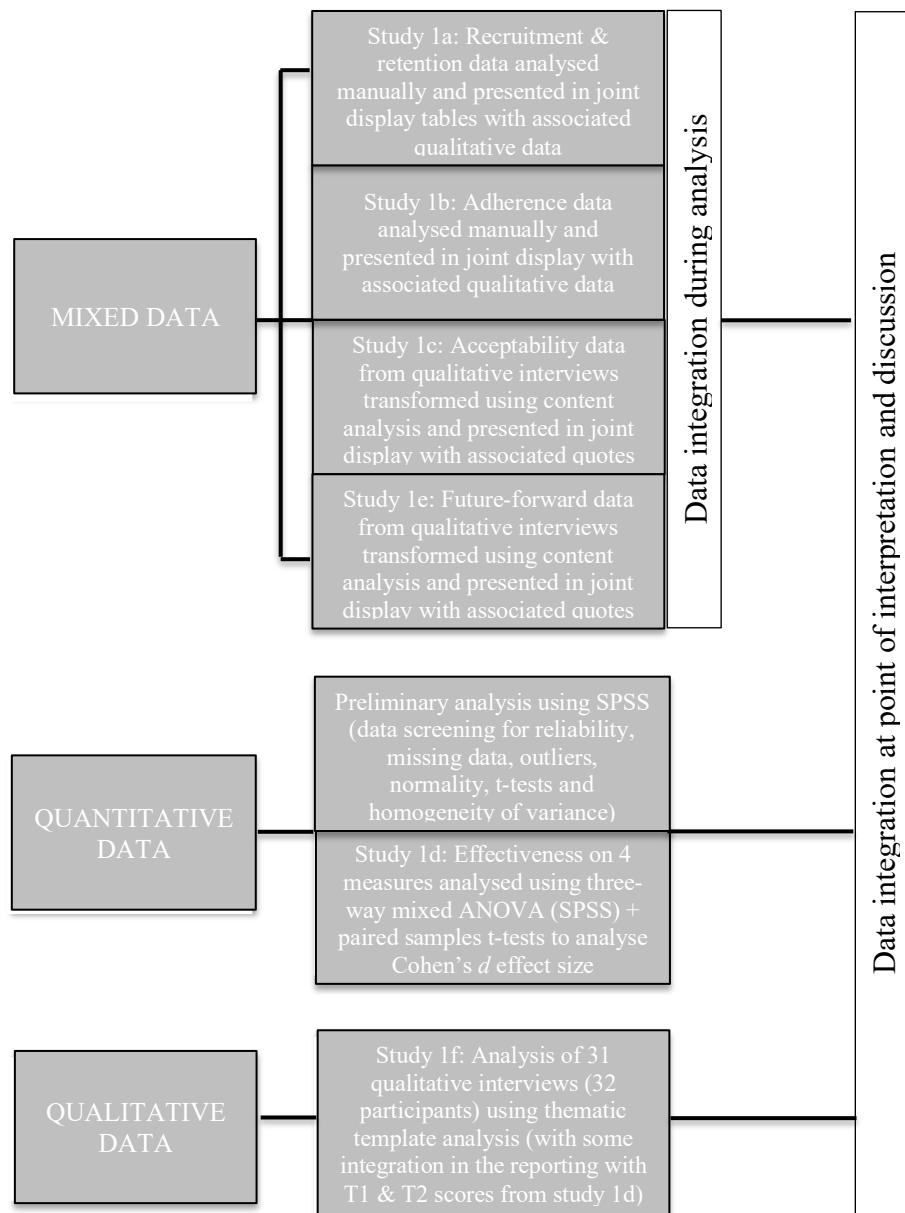
**3.12.2. Transcribing.** Transcribing software was used to provide an initial draft transcript of each interview. The researcher then read through the transcripts whilst simultaneously listening to the audio recordings, thereby allowing the researcher to make corrections to the transcript. Whilst the emphasis of the transcript was orthographic, notable pauses and non-verbal communication (such as laughter, um, argh and err) were referenced. In total the researcher listened to each of the 31 audio interviews (32 participants) a minimum of three times. The verbatim transcripts were then exported from the transcribing software and double-line formatted with line numbers for analysis. Word count per transcript ranged from 900 to 3400 words.

### **3.13 Analytic strategy**

**3.13.1. Data analysis overview.** Analytic methods were pragmatically selected for their suitability and minimal sufficiency in addressing the research questions and assumptions (Wasserman, 2013). Some data integration occurred during analysis, with the remainder at the point of discussion and interpretation. The overall analysis comprised six studies (a–f). An overview of the analytic strategies and points of mixed methods integration for each of these studies is shown in Figure 3.4.

**Figure 3.4**

*Data analysis strategy and mixed methods data integration overview*



**3.13.2. Quantitative data analysis strategy.** All analyses were conducted using SPSS. Preliminary analysis involved data screening for reliability via Cronbach alpha scores, missing data and t-tests to check that the two sample groups could be combined (Relate and AF). The data was screened ahead of running the main analysis to ensure it met the analytic assumptions, involving checks for outliers, normality and homogeneity of variance. The main analysis utilised descriptive statistics and a three-way mixed ANOVA to examine the interaction between study condition (WLC, SRA & REV), partner (male, female), and changes

over time (T1, T2) on commitment level, investment size, emotional intimacy and relationship satisfaction. The design was a 3 (condition) x 2 (partner) x 2 (time) between-within-within study. This approach was selected in light of recommendations for dyadic data analysis by Kenny, Kashy and Cook (2006) as an analysis of non-variance identified the unit of analysis as the couple dyad. Where a statistically significant interaction was noted, further analysis using a paired sample t-test was performed for each of the three groups (REV, SRA and WLC) to compare mean scores per couple for relationship satisfaction in T1 and T2. Using an online calculator (Calculator Academy, 2020), these mean scores were used to calculate Cohen's *d* measure of effect size.

**3.13.3. Qualitative data analysis strategy.** The qualitative data analysis strategy utilised thematic template analysis. Template analysis draws on Braun and Clarke's (2006) six-phase model of thematic analysis. It is an established method for organising and analysing thematic data in the social sciences (King, 1998, King & Brooks, 2017) and is particularly suitable for large qualitative samples (Brooks et al., 2015). Template rather than framework thematic analysis was selected for its more flexible and iterative approach during the coding process and template development (Brooks et al., 2015).

There are multiple ways of conducting thematic analysis (King et al., 2010) and following results from study 1d, an inductive approach was used in the present study, with the analysis conducted manually rather than using NVivo (based on the researcher's prior qualitative experience of manual qualitative analysis). Central to the thematic analysis is the development of a coding template summarising the key themes identified by the researcher (King, 1998; King & Brooks, 2017). Drawing on the trustworthiness criteria outlined by Lincoln and Guba (1985) and updated by Nowell et al. (2017), themes in the present study captured specific features from the participant accounts that characterised a particular aspect or perception of their experience that was relevant to the research question(s). Drawing on guidelines outlined by King (1998), the six stages of thematic template analysis in the present study were as follows:

1. Familiarisation with data: The researcher listened to all audios at least three times whilst simultaneously reading the transcripts and making separate notations of key thoughts relevant to the research question(s).

2. Preliminary coding: Following familiarisation with the full data set, the first six received transcripts were then coded in detail to highlight any areas of text relevant to the research questions.
3. Initial coding template: Drawing on initial notations from all 32 participants and codes from the first six interviews, the researcher drafted an initial coding template to clarify the relationships between different codes and themes.
4. Applying initial template to further analysis: This initial template was then applied to a further six interviews and modifications were made iteratively to the template when new codes or new theme structures were identified.
5. Iterative process of modifying the template: This iterative process of modifying the template in response to further data continued until the point of data saturation was reached after 20 interviews. The final template was defined as capturing a rich and full representation of the coded data.
6. This final template was then applied to the full data set to provide the basis for data reporting and interpretation.

**3.13.4. Mixed analysis and integration strategy.** Integration is the essential and defining component of MMR (Schoonenboom & Johnson, 2017) and, through the lens of pragmatism, integration in this study was driven by the overarching research question. The integration strategy in the present study was three-fold: transformation, joint display and narrative. At the point of analysis, aspects of the qualitative data were transformed using content analysis and numerical data was presented alongside associated narrative to expand understanding of the numerical codes. Another analytic integration strategy involved presenting aspects of data from different sources in joint display tables, with qualitative and quantitative data presented together to complement each other. The remaining majority of qualitative and quantitative data was analysed separately, as suggested by Teddlie and Tashakkori (2009), with contiguous narrative integration occurring at the point of interpretation and discussion. Interpretation did not involve simply comparing the two sets of data, as Creswell and Plano Clark (2018) observe that this fails to provide a meaningful connection. Instead the research used qualitative themes to provide additional insight into the

quantitative findings as well as to provide new insights into the literature and theory informing the hypotheses in the experimental arm of the study.

### **3.14 Ethical considerations**

**3.14.1. Ethical consent.** As described above, ethical consent (ETH-1819-0555) plus necessary amendments were sought for this study (ETH1819-0922; ETH1891-1610; ETH1920-0063; 1920-0282; ETH2021-0308; see Appendix L). In addition to the consent and inclusion / exclusion criteria already discussed, further ethical issues are now considered.

**3.14.2. The dual role.** The dual role of both presenter and researcher raises the potential for social desirability bias in a qualitative face-to-face interview setting (Chew-Graham et al., 2002; Haverkamp, 2005; Shaw 2003). Dual roles are common and not necessarily problematic when researching within the caring professions (Holloway & Wheeler, 1995) but it was felt important and ethical to create space for participants to respond candidly about their experiences. The Dictaphone was a solution to this issue, although with acknowledged limitations in terms of ability to probe and follow up on specific points. However, it was felt that any loss of depth would be compensated for by sample breadth and size.

**3.14.3. Safeguarding / risk.** Couples were asked to confirm that there were no current court cases, child protection orders, molestation orders, injunctions or other legal proceedings relating to the couple or immediate family. No couples had to be excluded on this basis. The researcher listened to all audio interviews within 48 hours to ensure no issues of risk or safeguarding required attention. No such issues arose.

**3.14.4. Distinction between research and clinical issues.** It was important that individuals were fully aware of the distinction between counselling and their involvement in the research. It was clearly explained (verbal and written) to participants in the Relate sample that Relate would be unaware of participant identities or the content of the interviews, other than in a case of extreme risk, and that participation or non-participation would have no impact on counselling with Relate. Similarly, the researcher's role was clarified to all participants as non-

therapeutic. All couples in both the Relate and AF samples were provided with contact details for Relate so that they could easily access more intensive relationship support if they felt in need of it, either during or on completion of the study.

**3.14.5. Respect for autonomy and self-direction.** It is not uncommon for one partner to be more invested in working on the relationship. Dual willingness was therefore inherent to the consenting process and each partner was sent their own private email or postal correspondence to minimise potential for coercion or false partner representation.

**3.14.6. Justice / Fairness.** To avoid disadvantaging or disappointing the WLC and SRA groups, these participants were offered the opportunity to participate in the intervention upon completion of their involvement in the study. All participants in these two groups received a debrief email and links to the three REV videos. A copy of the debrief is included in Appendix M.

**3.14.7. Respectful valuing of participation.** Finally, all participants were offered the option to receive an aggregate summary report of the findings of all participants, all anonymised. This validated their valuable contribution to research and knowledge about CRE.

**3.14.8. Pragmatism and ethics.** Finally, concern has been expressed by Denzin (2017) that overly focusing on methods can reduce emphasis on the deeper philosophy of pragmatism, with its focus on issues of social justice. Denzin urges researchers adopting a pragmatic stance to remember that “enquiry is always a moral, political and value-laden enterprise” (2017, pp. 424-425) and this is addressed through the researcher’s reflexive stance (Chapter 7) that underpins this study.

### **3.15 Overall evaluation of methodology**

**3.15.1. Pragmatism vs. Critical Realism.** Pragmatism was selected over critical realism for its focus on reality defined through experience of what works and its emphasis on what is practical and useful. Pragmatism is considered a

particularly suitable paradigm for MFT research where interventions are valued in terms of their usefulness in often complex and idiosyncratic presentations (Dolbin-MacNab et al., 2014; Gambrel & Butler, 2013).

**3.15.2. Couples.** The rationale for recruiting couples rather than individuals was three-fold. Firstly, research has found improved outcomes when couples attend CRE together rather than alone (Adler-Baeder et al., 2010). Secondly, the REV was designed to be watched and utilised by couples, with an emphasis on couple discussions and interactions to facilitate change. Thirdly, the validity and reliability of relationship research is enhanced when both partners are included in the assessment (Larson, 1974; Thompson & Walker, 1982).

**3.15.3. Two samples of participants (Relate and AF).** The rationale for sampling participants from two sources was two-fold. Firstly, to represent a wide breadth of couple distress given that individuals differ both qualitatively and quantitatively depending on whether they are in discordant or non-discordant relationships (Whisman et al., 2008). Couples waiting for counselling with Relate were likely to be in distress and/or crisis, although it is acknowledged that there are other reasons why couples may attend counselling. Whilst the AF sample did not preclude couples in distress, it was anticipated that this sample would capture more happy couples, and also couples that might be less inclined towards seeking relationship support or at different stages of accepting relationship help. Secondly, researchers are encouraged to achieve sample breadth and diversity when evaluating CRE (Markman & Rhoades, 2012; Rogge et al., 2006).

**3.15.4. Sample size.** The sample size was calculated using an a-priori sample calculation using G\*Power (Appendix H) showing that a sample of 60 couples was required to achieve power of 99% based on an effect size of 0.36. This effect size was informed by a meta-analysis of 117 CRE studies (Hawkins et al., 2008). Additional couples were recruited in anticipation of sample attrition (that did not occur), hence the final sample of 71 couples. Of these, 67 heterosexual couples were entered into the ANOVA to examine changes over time on the four key measures and the post-hoc power calculation (Appendix I) shows this sample to have power of >99%, which exceeds the typical power of .80 (80%) usually aimed for in experimental designs (Suresh & Chandrashekara, 2012).

**3.15.5. Recruitment.** Recruiters involved in the AF sample provided feedback that couples were generally approached only if recruiters felt they would be interested and thus a degree of self-selection bias is acknowledged. Another area of bias is that reluctant or fearful male participants may be under-represented within the sample. Emails were received during the recruitment from ten women expressing interest in participating but all subsequently declined, citing either that their male partner either feared the research might make their relationship worse ( $n=6$ ), or didn't feel there were any problems to address ( $n=4$ ). This fear and reluctance amongst men has been consistently identified in the CRE literature (Burr et al., 2014; Rogge et al., 2013; Wood et al., 2014).

**3.15.6. Time between T1 and T2.** Three to four weeks was selected in collaboration with Relate as the likely time period that most Relate couples have to wait between IA and their first counselling appointment. It was also felt that weekly intervals between videos would provide enough time for couples to discuss and implement ideas from each video without leaving too long a gap for momentum to be lost.

**3.15.7. Frequency and number of videos.** The choice of three videos was made in collaboration with the research supervisor and Relate based on what was feasible in less than around 4–6 weeks whilst not encroaching on the work of counselling. It was felt that more than three videos might reduce the appeal of the REV to AF couples who might not see the need for a more intensive intervention.

**3.15.8. Self-report questionnaires.** Locating the study in the real-world context of participants' homes meant that self-report measures were the most pragmatic research solution, with participants asked to retrospectively self-report at the level of the individual on where they changed behaviour following each video. Validation for self-report measures was enhanced by having dyadic data.

**3.15.9. Quantitative measures.** Measures have been selected to reflect both individual and interpersonal processes as is considered good practice in MFT (Cano & O'Leary, 2000; Whisman & Uebelacker, 2006), and to meet Alderfer et al.'s (2008) psychometric reliability criteria on internal consistency (with an alpha value

exceeding .70). The specific measures selected were chosen to operationalise the conceptualisation of each pragmatic assumption contained within the videos being evaluated: relationship satisfaction, commitment level, investment size and emotional intimacy. Results of confirmatory factor analysis in prior studies (e.g. Rusbult et al., 1998; Sinclair & Dowdy, 2005) as well as the present study provide evidence that the four measures are distinct and thus have good validity in addition to reliability. Further information on this can be found in Section 4.2.3.

**3.15.10. Measures for relationship Satisfaction, commitment level and investment size.** Whilst numerous measures of relationship satisfaction are available, it was decided that all three measures should be selected from the IMR (Rusbult et al., 1998) given its close fit to the video content. However, as discussed in Chapter 2, the sub-scale on ‘quality of alternatives’ was excluded for not being relevant to the REV focus.

**3.15.11. Measure for emotional intimacy.** Consideration was given to other measures of emotional intimacy such as the PAIR inventory (Schaeffer & Olson, 1981), but correspondence with the authors and more up-to-date literature favoured the Emotional Intimacy Scale (Sinclair & Dowdy, 2005) for its brevity as well as its focus on perceived emotional intimacy in one close relationship.

**3.15.12. Data saturation.** Data saturation was reached by around 20 transcripts and at this point no further requests were made to participants for qualitative interviews. Drawing on the literature, saturation was defined as being the point of diminishing returns, where no notable new codes and themes were being identified (Mason, 2010; Saunders et al., 2018). Because of the time lag, additional interviews were still in process at the point where saturation was reached and the researcher considered it ethical to analyse all recorded interviews, bringing the total to 32 participants.

## **Chapter 4. Quantitative and mixed results**

### **4.1 Introduction**

This chapter reports quantitative and mixed (qualitative and quantitative) analysis of data from 142 individuals (71 couples). There were three study groups: 25 couples (50 individuals) in a wait-list control (WLC) group, 23 couples (46 individuals) in a shared relationship activity (SRA) group and 23 couples (46 individuals) in the relationship education video (REV) intervention group. All participants completed four outcome measures at T1 and T2 (approximately 3–4 weeks later). Most individuals in the REV group ( $N=32$ ) also completed a short, self-directed qualitative interview and some data from these interviews was transformed into quantitative data and is presented as mixed analysis in the present study. Participants were recruited from two sample pools (Relate and As Found; AF) to gain a broad spectrum of relationship distress, investment size, commitment level and emotional intimacy at baseline. These two samples were analysed in the preliminary analysis to ensure they were appropriate to merge for the main analysis. An alpha level of 0.5 was used for all statistical tests.

The overarching question for the present study was to explore how and in what ways the brief REV programme has potential as a universal intervention to support and improve couple relationships. The analysis of this overarching question is segmented into six separate studies (1a, 1b, 1c, 1d, 1e and 1f) based around different sub-questions and hypotheses to explore the feasibility of the intervention. The research questions and hypotheses are summarised in Table 4.1, which also shows which method of analysis (qualitative, quantitative or mixed) was used to address each question or hypothesis, and point of data integration for each study. This chapter presents results of studies 1a-1e, with Chapter 5 presenting the qualitative results of study 1f.

**Table 4.1***Summary of Research Questions and Hypotheses*

Research Questions & Hypotheses	Data source	Quan	Qual	Where reported	Point of integration
<b>Overarching research question:</b> How and in what ways is the brief REV programme feasible, acceptable and effective as a universal intervention to support and improve couple relationships?	Recruitment data Self-report data T1 & T2 measures on 4 outcome variables 31 self-recorded qualitative interviews	✓	✓	Studies 1a, 1b, 1c, 1d, 1e & 1f	Discussion
<b>Integrated mixed methods question 1:</b> How and in what ways does combining of quantitative and qualitative data provide a richer evaluation of the REV intervention than with either method in isolation?	Recruitment data Self-report data T1 & T2 measures on 4 outcome variables 31 self-recorded qual. interviews	✓	✓		Discussion
<b>Integrated mixed methods question 2:</b> How feasible is the intervention in terms of adherence to the programme?	Self-report data & 31 self-recorded qual. interviews	✓	✓	Study 1b	Analysis & Discussion
<b>Integrated mixed methods question 3:</b> How and in what ways is the REV intervention considered acceptable by both male and female partners.	Self-report data & 31 self-recorded qual. interviews	✓	✓	Study 1c Study 1e	Analysis & Discussion
<b>Hypothesis 1:</b> There will be a greater improvement in commitment level between T1 and T2 for the REV group versus a) the SRA and b) WLC groups.	7-item Relationship satisfaction Likert scale (Rusbult et al., 1998)	✓		Study 1d	Discussion
<b>Hypothesis 2:</b> There will be a greater improvement in investment size between T1 and T2 for the REV group versus a) the SRA and b) WLC groups.	5-item Investment size Likert scale (Rusbult et al., 1998)	✓		Study 1d	Discussion
<b>Hypothesis 3:</b> There will be a greater improvement in emotional intimacy between T1 and T2 for the REV group versus a) the SRA and b) WLC groups.	5-item emotional intimacy Likert scale (Sinclair & Dowdy, 2005)	✓		Study 1d	Discussion
<b>Hypothesis 4:</b> There will be a greater improvement in relationship satisfaction between T1 and T2 for the REV group versus a) the SRA and b) WLC groups.	5-item commitment level Likert scale (Rusbult et al., 1998)	✓		Study 1d	Discussion
<b>Qualitative research question:</b> What are the experiences of individuals participating in the REV programme?	31 self-recorded qualitative interviews (32 individuals)		✓	Study 1f	Discussion

Attention in this chapter is initially paid to the preliminary analysis in Section 4.2. The aim of the preliminary analysis was to ensure that the data met the necessary analytic assumptions for the quantitative analyses. The preliminary analysis in Section 4.2.1 starts with a comparison of means for the two sample pools (Relate and AF) on key demographics (ethnicity, age, sexuality, relationship status

and relationship duration) to ensure the two recruitment pools could be merged for the main analysis, allowing for certain anticipated differences. The two samples were also compared for mean T1 scores on the four outcome measures of relationship satisfaction, investment size, commitment level and emotional intimacy, although differences were not considered prohibitive to merging the samples, as these differences were intentionally sought to provide diversity within the sample. The preliminary analysis then reports on data reliability based on Cronbach's alpha coefficients (Section 4.2.2). Scale factor structure is then examined for interrelatedness and to evaluate that the four outcome measures could be analysed independently of each other (Section 4.2.3). Preliminary analysis is then presented on missing data (Section 4.2.4). Normality of the data is reported based on analysis of skewness and kurtosis (Section 4.2.5). Analysis is then reported on outliers using Z scores to examine for univariate outliers (Section 4.2.6). Finally, analysis is reported on homogeneity of variance using Levene's output pertaining to t-tests and ANOVA analysis (Section 4.2.7).

Following the preliminary analysis, this chapter moves on to focus in Section 4.3 on the main quantitative and mixed analysis. This analysis focuses on a range of issues relevant to intervention feasibility, as outlined in the MRC (2000) guidelines on researching a complex healthcare intervention and also incorporating guidance from the more recent 2008 and 2019 updates (Craig et al., 2008; O'Cathain et al., 2019). The main analysis reports on five dimensions of intervention feasibility relevant to the exploratory evaluation of a complex intervention: 1) recruitment and retention; 2) adherence to the programme; 3) acceptability of the intervention; 4) effectiveness in terms of outcome measures; and 5) issues relevant to the future development of the intervention.

Section 4.3.1 reports on study 1a (Recruitment and retention). Recruitment and retention are important elements to evaluate when assessing intervention feasibility (Bowen et al., 2009; Craig et al., 2008). In light of this, the aim of this study was to identify and understand issues relevant to recruiting and retaining couples to the programme. This was evaluated by conducting a mixed analysis of the recruitment process. Quantitative data on contact, recruitment and attrition rates was analysed for the sample overall as well as with regard to gender (males / females) based on manually calculating frequencies. As recommended by Sidani (2016), this mixed methods intervention study incorporates a qualitative perspective on the recruitment and enrolment process, with a focus on motivation

as one dimension of recruitment and enrolment (Burr et al., 2017). The qualitative interviews were analysed in conjunction with the numerical data to provide a greater depth of understanding on the factors that motivated participants to sign up for the study. Because the literature identifies that gender is relevant to recruitment and retention in CRE (Van Acker, 2008), this data was examined for gender differences.

Section 4.3.2 reports on study 1b (Adherence to the programme). The aim of this study was to evaluate feasibility from the perspective of adherence to provide a context for interpreting the outcome data, but also with regard to issues of generalisability (Craig et al., 2008; MRC, 2000). This study presents an integrated mixed analysis of both self-report data and qualitative feedback to evaluate adherence to the three elements of a) video watching, b) discussion, and c) behavioural change for both the REV and SRA groups. Video watching relates to literature that examines the benefits for relationship satisfaction of shared activities (Aron et al., 2000) and specifically of sharing the experience of watching shared media together (Gomillion et al., 2017; Rogge et al, 2013). Discussion relates to literature finding that self-disclosure and partner disclosure enhance feelings of emotional intimacy (Laurenceau et al., 1998). Behaviour change relates to the literature on self-change as an important process of change in CRE (Halford, 2011). The self-report data was coded for numerical content and this numerical data is presented alongside qualitative commentary to provide an expanded understanding of the numerical findings.

Section 4.3.3 reports on study 1c (Acceptability of the intervention). Assessing acceptability is increasingly important when evaluating healthcare interventions (O'Cathain et al., Sekhon et al., 2017). It is noted that acceptability does not equate to effect, but assessing acceptability is nonetheless considered necessary, although not sufficient, when evaluating CRE interventions (Halford, 2011). Bowen et al. (2009, p. 453) define acceptability within the context of a feasibility study as “looking at how the intended individual recipients – both the target individuals and those involved in implementing programs – react to the intervention”. Based on this definition, the analysis of intervention acceptability comprised an integrated mixed analysis of the qualitative interviews from REV participants, where qualitative commentary was transformed into quantitative codes. This quantified data is presented in a joint display table, with numerical data presented alongside supporting quotations.

Section 4.3.4 reports on study 1d (Effectiveness on four outcome measures). A key issue when evaluating the feasibility of an intervention is to get a sense of its effectiveness with regard to outcome measures (Craig et al., 2008; Bowen et al., 2009; MRC, 2000). Study 1d examined four outcome measures of commitment level, investment size, relationship satisfaction (Rusbult et al., 1998) and emotional intimacy (Sinclair & Dowdy, 2005) to evaluate the effectiveness of the intervention. This analysis relates to hypotheses 1a&b–4a&b (Table 4.1). Each measure was analysed and is discussed in turn with regard to descriptive statistics and analysis of change over time (T1 to T2) using a three-way mixed ANOVA. An analysis of non-variance identified the unit of analysis for this study as the couple dyad. Gender was used as the distinguishable variable for this dyadic analysis, which necessitated the exclusion of four same-sex couples from the data sample for this study, leaving data on 67 heterosexual couples evenly spread across the three study groups (WLC, SRA & REV). There was no rationale for excluding same-sex couples from the qualitative analysis (study 1f) and so the experiences of the same-sex couples along with reporting of their T1 and T2 relationship satisfaction scores is still retained within the overall study.

Reporting of study 1e (future focus) is covered in section 4.3.6. The aim of this study was to examine participant experiences of the REV programme relevant to the development of the intervention moving forward. This study was analysed and presented in three parts. Study 1e(a) examined the programme elements considered most likely to have lasting impact. Study 1e(b) examined suggested improvements. Study 1e(c) examined presenter issues. All three parts of study 1f utilised a content analysis of the 31 qualitative interviews with 32 participants, with the data for each part presented in a joint display table combining numerical and qualitative data.

One final point to note on the way in which this chapter is presented is that, because of the breadth of issues described, the researcher has periodically incorporated reference to existing literature and research to contextualise the findings where this was considered pragmatically useful.

## 4.2 Preliminary analysis

**4.2.1. Association between categorical variables.** Analyses were run to compare the two different recruitment samples (AF vs. Relate) on the demographics

of ethnicity, relationship status, sexual orientation, age and relationship duration. In addition, the samples were compared on baseline (T1) levels of relationship satisfaction, investment size, commitment level and emotional intimacy. Ethnicity, relationship status and sexual orientation were categorical variables and were therefore analysed via a Chi Square test of association, whereas the remaining variables were continuous and investigated via a series of independent-samples t-tests. The outcomes are presented below.

**4.2.1.1. Ethnicity.** The sample was recruited to reflect a diversity of ethnicity but it is noted that a majority of participants were white (87%) versus other ethnicities (13%). The results of the Chi Square revealed no significant association between ethnicity and the recruitment samples ( $\chi^2 (4)=2.63, p=.62$ ).

**4.2.1.2. Relationship status.** The results of the Chi Square revealed a significant association between relationship status and recruitment samples ( $\chi^2 (3)=11.33, p=<.05$ ). Table 4.2 shows that there are comparable numbers of participants in the AF versus Relate samples with regard to being married and in civil partnerships. However, there was a noteworthy difference when comparing the Relate and AF samples on being ‘in a relationship and living with partner’, whereby there was a higher proportion of Relate participants in this category. Similarly, there was a noteworthy difference in the category of being ‘in a relationship and not living with partner’, whereby there was a higher proportion of AF participants in this category.

**Table 4.2**

*Comparison between samples on relationship status*

		Relate	As Found
Married	<i>n</i>	40	48
	% within participant group	(58.8%)	(64.86%)
In a relationship and	<i>n</i>	26	14
living with	% within participant group	(38.2%)	(18.91%)
In a relationship and	<i>n</i>	2	10
not living with	% within participant group	(2.9%)	(13.5%)
Civil partnership	<i>n</i>	0	2
	% within participant group	(0%)	(2.7%)

*Note:* Relate sample N=68; As Found sample N=74

**4.2.1.3. Sexuality.** The sample comprised predominantly heterosexual couples (94%,  $n=67$ ) compared to same-sex couples (6%,  $n=4$ ). The results of the Chi Square revealed no significant association between sexuality and recruitment samples ( $\chi^2 (3)=6.85, p=.77$ ).

**4.2.1.4. Age.** The age of participants across the sample ranged from 20–75 (22–75 in the Relate group, 20–75 in the AF group). The Levene's test revealed that the equality of variances assumption had been met ( $F=3.30, p=.07$ ). The t-test revealed no significant difference between the age of the participants in the Relate group ( $M=43.19, SD=12.12$ ) versus the AF group ( $M=44.89, SD=14.27$ ), ( $t(139)=-.76, p=.45$ ).

**4.2.1.5. Relationship duration.** The length of relationship ranged from 1–54 years (2–31 years in the Relate group, 1–54 years in the AF group). The Levene's result revealed that the equality of variances assumption had not been met ( $F=22.16, p<.001$ ). The t-test revealed no significant difference in relationship duration ( $t(119.18)=-1.10, p=.28$ ) between the Relate group ( $M=14.46, SD=8.73$ ) versus the AF group ( $M=16.66, SD=14.57$ ).

**4.2.1.6. T1 relationship satisfaction.** The Levene's result revealed that the equality of variances assumption had been met ( $F=.59, p=.45$ ). The t-test revealed a significant difference in relationship satisfaction ( $t(139)=-10.10, p<.001$ ) between the groups, with the Relate group ( $M=3.41, SD=1.68$ ) scoring lower than the AF group ( $M=6.31, SD=1.73$ ).

**4.2.1.7. T1 investment size.** The Levene's result revealed that the equality of variances assumption had been met ( $F=1.94, p=.17$ ). The t-test revealed a significant difference ( $t(139)=-2.86, p<.01$ ) in investment size between the groups, with the Relate group ( $M=5.25, SD=1.34$ ) scoring lower than the AF group ( $M=5.93, SD=1.49$ ).

**4.2.1.8. T1 commitment level.** The Levene's result revealed that the equality of variances assumption had not been met ( $F=24.55, p<.001$ ). The t-test revealed a significant difference in commitment level ( $t(111.19)=-5.89, p<.01$ ) between the

groups, with the Relate group ( $M=6.61$ ,  $SD=1.21$ ) scoring lower than the AF group ( $M=7.61$ ,  $SD=.76$ ).

**4.2.1.9. T1 emotional intimacy.** The Levene's result revealed that the equality of variances assumption had not been met ( $F=9.66$ ,  $p<.01$ ). The t-test a significant difference in emotional intimacy ( $t(119.01)=-9.47$ ,  $p<.001$ ) between the groups, with the Relate group ( $M=3.20$ ,  $SD=.92$ ) scoring lower than the AF group ( $M=4.48$ ,  $SD=.65$ ).

**4.2.1.10. Implication of associations for merging samples.** The differences in baseline measures were not considered a constraint to merging the samples as this was the intention in recruiting from two different sample pools, as described in the Methodology chapter.

**4.2.2. Reliability.** The Cronbach's alpha coefficients are presented in Table 4.3 and show desirable levels of reliability for each of the study scales. It is noted that the alpha values for relationship satisfaction, commitment level and emotional intimacy were particularly high but are in line with those noted in the literature (Rusbult et al., 1998; Sinclair & Dowdy, 2005).

**Table 4.3**

*Reliability of study scales*

Scale	Cronbach's alpha
Relationship satisfaction (T1)	.95
Relationship satisfaction (T2)	.96
Investment size (T1)	.77
Investment size (T2)	.81
Commitment level (T1)	.93
Commitment level (T2)	.94
Emotional intimacy (T1)	.89
Emotional intimacy (T2)	.92

*Note:* N=142

**4.2.3. Scale factor structure.** Whilst relationship satisfaction, investment size, commitment level and emotional intimacy were shown to interrelate (as shown in Table 4.4), the results of confirmatory factor analysis in prior studies (e.g. Rusbult

et al., 1998; Sinclair & Dowdy, 2005) provided evidence that they can be analysed as discrete constructs.

**Table 4.4**

*Inter-correlations between the study variables at T1*

	Relationship Satisfaction	Investment Size	Commitment Level
Investment Size	.35***		
Commitment Level	.65***	.44***	
Emotional Intimacy	.82***	.30***	.46***

*Note:* N=142. \*\*\* p<.001

**4.2.4 Missing data.** Two couples in the WLC group withdrew from the study immediately following T1 measures to take up their first counselling appointment. These participants were not therefore included in the final quantitative data set. With regard to the final data set, there were no missing quantitative data.

**4.2.5. Outliers.** Z scores were created for each of the variables and these were examined for values greater than 3.29 or less than -3.29 (Field, 2009). Using this criterion, no univariate outliers were identified.

**4.2.6. Normality.** The normality of the data was assessed by examining the absolute skewness and kurtosis values of the Z scores for values greater than 1.96. This is deemed to be an appropriate approach for examining the normality of the data for small quantitative samples (Field, 2009). Using this criterion, the distribution of the data for each variable was acceptable in terms of normality.

**4.2.7. Homogeneity of variance.** Homogeneity of variance was evaluated using the Levene's output pertaining to t-tests and mixed ANOVA, analyses and is reported below.

### 4.3 Main analysis

**4.3.1. Introduction to main analysis.** The analysis in this section is presented in five sections, as outlined at the start of this chapter.

**4.3.2. Study 1a: Feasibility in terms of recruitment and attrition.** A total of 238 couples expressed initial interest in the research study and received a participant information pack (182 Relate, 56 AF). Of these, a total of 73 couples (31%) consented to participate, with a higher proportion of interested couples consenting in the AF sample (66%) compared with the Relate sample (20%). This difference is likely explained by the different recruitment methods between the two samples. This data shows that attrition occurred between the expression of initial interest and the point of consent, with no attrition following consent in the SRA and REV groups and only two couples withdrawing from the WLC group in order to start counselling. This fits with literature finding very low levels of attrition in another self-directed CRE programme (Wilson & Halford, 2008). The final sample comprised 71 couples (142 individuals) completing both T1 and T2 measures. The sample was evenly spread across the three groups: WLC (50 individuals/25 couples); SRA (46 individuals/23 couples); and REV (46 individuals/23 couples).

Table 4.5 shows that 86% of contact in the study came from women and just 14% from men. This data was not available for the Relate sample as initial contact was made jointly as a couple, but data obtained privately from Relate for March 2019–2020 identifies a similar, although less marked, pattern, with 57% of contacts for relationship counselling coming from women compared with 43% from men.

**Table 4.5**

*Initial expression of interest in the research: contact by gender*

	AF Couples <i>N</i> =37	(%)
Female partner makes initial contact	32	(86%)
Male partner makes initial contact	5	(14%)
Total	37	(100%)

Based on the predominance of contact from women, the qualitative interviews were examined to understand the differing motivations for participation based on gender. A content analysis on the REV sample (as qualitative data was only available for this group) transformed qualitative codes into numerical data and this is presented alongside qualitative comments to add nuance to each category of motivation. Some participants provided more than one answer, therefore the responses are not mutually exclusive. The results presented in the joint display Table 4.6 show three categories of motivation, with some participants mentioning more than one category. The most frequently mentioned motivation was to ‘help the couple relationship’ (66%,  $n=22$ ), followed by more ‘altruistic motivations’ to help others (31%,  $n=10$ ) and finally to provide a framework whilst ‘waiting for counselling’ (19%,  $n=6$ ).

It is notable from the quotations in Table 4.6 that female partners in particular expressed excitement at the idea of helping their relationship, and this fits with literature finding that female partners are more motivated than males to support and maintain the couple relationship (Cross & Madson, 1997a). Whilst a desire to support the relationship was expressed across both male and female partners, a notable pattern was observed amongst males, who were the only participants suggesting altruistic motivations (“helping with research” or “as a favour for a friend”). These altruistic reasons for participating are reflected in a qualitative theme of ‘secondary justification’ described further in Chapter 5. The third motivation for participating was noted exclusively in the Relate group and is discussed further as a qualitative theme in Chapter 5. Six Relate participants, representing almost half the Relate sample, felt it was helpful to “have a focus whilst waiting for our appointment” (Carol/Relate).

**Table 4.6***Motivation to participate in the research (REV group only)*

Motivation to participate	REV group N=32	Qualitative comments:
To help our relationship	22 (66%)	<i>I was excited as hopefully it was going to help us improve our relationship. (Mandy/AF)</i>  <i>I thought it could be interesting to see what else we could learn.... I felt quite excited about that. (Amy/AF)</i>  <i>I was quite excited about it and I thought it sounded a very good idea to really help us look after our relationship. (Barbara/AF)</i>
More altruistic rationale (to help others)	10 (31%)	<i>I was pleased to be taking part in a piece of academic research and I was intrigued to see if I could learn something from it that would help our relationship. (Ernie/AF)</i>  <i>Let's be honest, I only took part in this to do a favour to a friend at work who asked me to help out with the research.... I felt that marriage counselling was aimed at people who had relationships that were lost and perhaps weren't doing very well. (Tom/AF)</i>  <i>Excited by it, partly as a research thing but also to learn if there were things we could improve, things I could address. (John/AF)</i>
Something to do whilst waiting for counselling	6 (19%)	<i>I was very interested in helping with the research and so I was willing to be involved and thought it sounded interesting and that there might be some aspects that might be helpful to our relationship. (Freddie/Relate)</i>  <i>We were quite disappointed when we found out that we'd have to wait quite a long time for proper counselling and I think it was an opportunity for us to start discussing some issues in a more oriented and focused way. (Daniel/Relate)</i>  <i>It coincided with a gap before we could start face-to-face counselling. So, it was a good technique to really keep us thinking about the on-going issues in that interim period. (Aiden/Relate)</i>  <i>I think while you are waiting for therapy, um, it's useful to look at these things. (Arjan/Relate)</i>

**4.3.3. Study 1b: Feasibility in terms of adherence.** This study reports on a mixed analysis of self-report data on adherence to the intervention instructions regarding videos, discussions and behaviour change alongside supporting qualitative quotations. Participants in both the REV and SRA groups were asked to watch all three videos together as a couple at intervals of approximately one video per week. They were then asked to follow each video with a couple discussion relating to the video content (discussion duration was flexible and determined by the couple). Individuals in the REV (but not SRA) group were invited during each

video to implement any behaviour changes that they felt might benefit their relationship.

**4.3.3.1. Adherence to watching videos.** The joint display Table 4.7 shows full adherence in both the REV and SRA conditions, indicating that the intervention is feasible with regard to the number and length of videos. The self-report data was collected individually but is reported dyadically. Nevertheless, quotations are from individual participants. Validity of the self-report data was enhanced by having data from both partners and the REV data was also corroborated by viewing statistics on the password-protected Vimeo site. This high level of adherence is consistent with another study evaluating self-directed CRE that found 96% adherence to all tasks and instructions (Wilson & Halford, 2008). This suggests that once participants have committed to the programme, they are motivated to adhere to it.

Qualitative feedback from the 32 REV participants was examined to provide a contextual understanding on this high level of adherence and a selection of quotations is presented in the joint display Table 4.7. Participants were asked specifically about their thoughts on the length, frequency and number of videos. All except one participant ( $n=31$ ) reported favourably on the length and number of the REV videos (3 videos each lasting 15 minutes). However, when asked about improvements, around a third of participants felt that a greater number of shorter videos might have been preferable (see section 4.3.6.3). Participants were asked to watch the videos at a frequency of approximately one per week. Whilst self-report data was not collected specifically on this issue, qualitative feedback identified that most participants ( $n=24$ ) watched the videos weekly, but a minority ( $n=6$ ) watched them more flexibly, particularly those with children. Four participants found the time constraint (watching all three videos within 3–4 weeks) “really tight” or “quite stressful”. But all participants who expressed a view ( $n=13$ ) said they valued the flexibility to watch the videos at a time that suited them. Freddie described that “it really helped that we could watch them at a time that suited us”. Just over a third of participants ( $n=11$ ) articulated that receiving a weekly email containing the next video link “acted as a really helpful reminder” (Ahmed/Relate).

**Table 4.7***Adherence to watching videos in REV and SRA groups*

	REV N=23 couples	SRA N=23 couples	Qualitative quotes pertaining to number and frequency of videos in REV group
Watched 1st video together	23 (100%)	23 (100%)	<i>The video lengths were just right. It was enough to be to the point and also, I mean if any longer it probably wouldn't have as much impact because people would lose interest. The number of videos were the right amount as well. (Aya/Relate)</i>
Watched 2nd video together	23 (100%)	23 (100%)	<i>We committed to the idea of watching them and watched all three on three Monday evenings in a row. (Simon/Relate)</i>
Watched 3rd video together	23 (100%)	23 (100%)	<i>I think it worked fine. I think maybe four videos would be too much. And I think the video length was fine. .... anything shorter would have been too short, anything longer would have been too long. (Aiden/Relate)</i>
			<i>All the time we were watching it, it was really nice and relaxed and there was no tension. (Sarah/AF)</i>
			<i>The videos were really helpful and fun to watch... the time between videos was just right to put things into practice. (Brandon/AF)</i>
			<i>I thought the video link was good; it's not too long and it's not too short. (Kirstie/Relate)</i>

**4.3.3.2. Adherence to discussing videos.** This section presents a mixed analysis on whether REV and SRA couples had discussions following each video to evaluate adherence to these instructions. Self-report data on discussions and discussion length was collected individually but was corroborated between partners and presented with the couple as the unit of analysis, alongside pertinent data from the qualitative interviews. This retrospective information on discussion length is likely to be less accurate than real-time monitoring and should therefore be considered only as a guide of relative discussion length. The joint display Table 4.8 shows that all participants in the REV condition reported discussions following the first two videos, and only one participant did not recall having a discussion following the third video, although her partner reported having this third discussion. A similar profile is seen in the SRA group, aside from one couple who did not have a discussion following the second video. The average discussion length following the first video was almost three times longer in the REV group, at just over 31 minutes, compared with the SRA group at just under 12 minutes. Discussion length

progressively reduced with each successive video in both the REV and SRA conditions, with the average discussion length following the third video at just over 22 minutes for the REV group and 6 minutes for the SRA group.

The qualitative data was examined specifically to understand how participants had experienced the discussion element of the programme. A selection of comments is included in the joint display Table 4.8 to provide contextual understanding about how the discussions were experienced. The majority of feedback reflected that the discussions were helpful ( $n=19$ ) and were considered an important and valuable part of the programme, with a theme identified that the REV ‘facilitated novel conversations’. However, a theme was also identified that the discussions could result in ‘things feeling worse before they feel better’. Both these themes are discussed in more depth in Chapter 5.

**Table 4.8***Discussions and mean discussion length following each video*

	REV			SRA			Qualitative Feedback on discussions (REV only)
	N=23 couples	Mean disc. length (mins )	SD	N=23 couples	Mean disc. length (mins )	SD	
Discussion following 1st video	23 (100%)	31.1	19.6	23 (100%)	10.56	11.5	<i>It made it easier to talk about some things.... easier to talk about things in a civil way. I think the conversations we've had, even outside the dedicated ones after the video, have been less tense.</i> (Simon/Relate)
Discussion following 2nd video	23 (100%)	23.9	20.3	22 (96%)	6.7	3.84	<i>The discussions from each video were initially quite hard, sometimes hard to find the words to express them in a sensible fashion and to be suitably sensitive.</i> (Les/Relate)
Discussion following 3rd video	22.5 (98%)	22.0	18.8	23 (100%)	6.0	3.18	<i>It was really good because we don't normally discuss things after we've watched them, and it was really fun and we laughed at ourselves.</i> (Sally/AF)
							<i>We really enjoyed it and now we're sitting down every evening and discussing things, what's been stressful and stuff like that.</i> (Kirstie/Relate)
							<i>It was difficult at times and I got quite tearful at one point when discussing things, but then I think I just found it helpful and interesting to be able to discuss things together.</i> (Charlene/AF)
							<i>Discussing the content with my partner after each video has been really good and it was really helpful having a focus for discussion points.</i> (Cai/Relate)

**4.3.3.3. Adherence in terms of behaviour change.** Participants in the REV group were encouraged to implement ideas they found useful following each video and discussion in terms of behaviour change. Consequently, this section of analysis

only pertains to participants in the REV group. Because behaviour change was suggested as an individual choice, the analysis is conducted with the individual as unit of analysis. The descriptive statistics with regard to frequency of behaviour change following the intervention videos are presented in Table 4.9. This analysis found that all participants changed behaviour at some point, with a minority (7%,  $n=3$ ) changing behaviour after just one video, under half the remainder changing behaviour after two videos (41%,  $n=19$ ) and the majority changing behaviour after all three videos (52%,  $n=24$ ).

**Table 4.9**

*Behaviour change following intervention videos*

Behaviour change		
	$N=46$	(%)
Following 1 video	3	(7%)
Following 2 videos	19	(41%)
Following 3 videos	24	(52%)

The joint display Table 4.10 shows decreasing reports of behaviour change following each subsequent video. The majority of participants reported behaviour change following the first (93%,  $n=43$ ) and second (83%,  $n=38$ ) REV videos, but this dropped to 70% ( $n=19$ ) following the third video. Not all participants reported behaviour change from the outset; several participants did not change behaviour until the second and third videos. However, as results are based on self-reports, this can only be considered a guide with regard to behaviour change. The qualitative interviews were examined to better understand how participants experienced the process of behaviour change. Whilst not every participant discussed their behaviour change in response to all three videos, it was possible to locate where the behaviour change occurred from some interviews, and these comments are included in the joint display Table 4.10 to provide a flavour of the ways in which behaviour change was implemented.

**Table 4.10***Joint display on self-reported behaviour change*

	REV		Qualitative Feedback
	N=46	(%)	
Behaviour change following 1st video (Commitment)	43	93(%)	<i>After the first video, we decided that we needed to be much less judgemental when talking about things with each other. And that worked really well. (Ernie/AF)</i>
Behaviour change following 2nd video (Investment)	38	(83%)	<i>After the first video I put post-it notes about our motivation to be in this relationship and our mission statement round the house. (Aya/Relate)</i>
Behaviour change following 3 <sup>rd</sup> video (Emotional intimacy)	19	(70%)	<i>I've had a lot more joy doing things for my partner, or doing nice things with him because I was like "oh, I'm investing in the good stuff now". (Amy/AF)</i>  <i>What was difficult ... was actually then changing the way you live your life based on one video ... but I started to invest more after the second video. (Brandon/AF)</i>  <i>We could see the merit in trying to do things differently. And indeed, yeah, we were up for it. ... we were both trying to act differently as a result of our discussions and to invest more time to our relationship. (Irene/AF)</i>
			<i>After the third video on communication and emotional closeness we tried to listen to each other properly and not try to win an argument in the way that we might otherwise. (Peter/AF)</i>  <i>It was difficult to remember this and to do it. ... the challenge is more remembering than putting it into practice. (Brandon/AF)</i>  <i>The main thing I'll take from this programme is to sit down and take time to talk. (Kirstie/Relate)</i>

A content analysis on the 31 qualitative interviews (32 individuals) was carried out to better understand the way in which individuals were implementing their behaviour change. Most participants described more than one type of behaviour change so the codes are not mutually exclusive. Table 4.11 shows the main behaviour changes were to talk more (72%), to reduce behaviours that they felt would negatively impact their partner (56%), to look for things they could do to more actively support their partner (50%), to listen more attentively to their partner (50%), to get less upset about differences (38%), to work more collaboratively to solve problems (34%) and to use less blaming language (34%).

**Table 4.11***Different ways in which REV participants changed behaviour*

Changes made by participants	REV	
	N=32	(%)
Talked more / had more discussions	23	(72%)
Reduced behaviours that negatively impact partner	18	(56%)
Found ways to be supportive to partner	16	(50%)
Listened to partner more attentively	16	(50%)
Got less upset about our differences	12	(38%)
Worked together to solve problems	11	(34%)
Used less blaming language	11	(34%)
Others (single mentions only)	8	(25%)
It's hard to make changes / keep it up	8	(25%)

The final point in Table 4.11, that it is hard to maintain behaviour change, was mentioned explicitly by 25% of participants, but was latent in the way that around half of the participants described the impact of the programme. Les captures how the videos helped him think differently about changing his behaviour:

“I think it’s fair to say that to do things differently requires effort, and I was quite conscious of that. But then session two made it very clear that, I guess, that’s the point of relationships – to make an effort. So, I guess without that advice perhaps it might have felt a bit odd, but, given the advice that was given it felt more reasonable and more sensible that it did require effort.”

(Les/Relate)

Whilst some participants ( $n=8$ ) described behaviour change in terms of being an “effort”, others ( $n=9$ ) described enjoying the process of trying to do things differently:

“It was fun trying to do things differently as a result and we could see a real benefit to it immediately, you know, listening to each other better and so then I felt more listened to, which was really good.” (Barbara/Relate)

In summary, most participants endeavoured to change their behaviour as a result of the programme and most reflected on this as valuable and useful to the relationship. However, a quarter of the participants ( $n=8$ ) explicitly mentioned that it was quite an effort, which is important to consider in terms of how to support the maintenance of positive changes.

**4.3.4. Study 1c: Acceptability of the intervention.** This study reports on a content analysis of the subjective reactions of participants to the REV. Qualitative data relating to participant reaction was captured and, for transparency, is included in grid form in Appendix N. The qualitative data for each participant was transformed using content analysis into a single code per participant based on a 5-point scale (1=extremely negative reaction, 2=fairly negative reaction, 3=neutral reaction, 4=fairly positive reaction, 5=extremely positive reaction). The results of this content analysis are presented in the joint display Table 4.12, which shows that all participants conveyed a reaction to the programme that was either very positive (77%) or fairly positive (23%). A representative selection of the qualitative comments pertaining to these codes is included in Table 4.12 to provide a contextual understanding of how the intervention was experienced. These qualitative comments highlight that those who have been coded as ‘very positive’ reflect a wholeheartedly positive reaction to the intervention, whereas those coded as ‘quite positive’ had a favourable reaction that was either muted or was counterbalanced by some reservations.

The mixed analysis on the reaction of participants indicates that the REV intervention was acceptable across the full range of participants interviewed (including the high distress Relate individuals as well as those in the AF sample who were not otherwise looking to access support for their relationship), and also across males and females, different sexualities, and across the spectrum of age and relationship duration.

**Table 4.12**

*Joint display on perceptions of intervention acceptability*

<b>Reaction N=32 (%)</b>	<b>Qualitative expansion on reaction</b>
Very positive 25 (77%)	<p><i>It really helped to be able to talk about how different we are from one another. So that was all really useful stuff. The complete set of stuff was useful.</i> (Lucy/Relate)</p> <p><i>I thought the programme was really helpful and I'm really glad that we had taken a decision to take part .... the videos no doubt were the most helpful part of the programme.</i> "(Shreya/Relate)</p> <p><i>I was pleasantly surprised, although I didn't really know what to expect, but I thought the presentations were very clear and thought-provoking.</i> (Peter/AF)</p> <p><i>The overall experience was positive. I think it gave me a reminder of who we are and where we need to make an effort to continue to grow and develop and have a positive relationship.</i> (Tom/AF)</p> <p><i>I walked away with a very positive perspective on the programme.</i> (Arjan/Relate)</p> <p><i>The videos really focused our minds on our relationship and I think that helped a lot.</i> (Daniel/Relate)</p> <p><i>It was really useful to have discussions and actually sit down and talk about our relationship and I think it made us focus on that which we haven't done in the past.</i> (Charlie/Relate)</p> <p><i>I actually really enjoyed it.... I think we got a lot out of talking to each other about what was said and then setting ourselves some objectives for the week.... it actually exceeded my expectations.</i> (Irene/AF)</p>
Fairly positive 7 (23%)	<p><i>I thought it was a worthwhile exercise.... the discussions afterwards were kind of useful start points.</i> (Simon/Relate)</p> <p><i>It was quite helpful in telling us our issues and giving us the ability to talk about it and pinpointing the actual problems that we probably did not think about prior to the videos and prior to the questions that were asked during the videos for us to speak about and discuss.</i> (Aya/Relate)</p> <p><i>I felt that some parts were really interesting and other parts didn't really, maybe, relate to us. It gets you thinking about things in different ways.</i> (Sarah/AF)</p>

**4.3.5. Study 1d: Effectiveness on relationship satisfaction, investment size, commitment level and emotional intimacy.** Four outcome measures of commitment level, investment size, relationship satisfaction (Rusbult et al., 1998) and emotional intimacy (Sinclair & Dowdy, 2005) were examined in this study to evaluate effectiveness of the REV versus WLC and SRA groups. A full presentation of the measures can be found in Table 3.4. Prior to the main analysis, four one-way ANOVAs were run to examine the data for any significant differences between the study conditions at baseline with regard to commitment level, investment size, emotional intimacy and relationship satisfaction. This revealed no significant differences between the study conditions at T1 with regard to commitment level ( $F(2,131)=.48, p=.62$ ), investment size ( $F(2,131)=1.76, p=.43$ ), emotional intimacy  $F(2,131)=1.45, p=.24$  and relationship satisfaction ( $F(2,131)=1.38, p=.26$ ), indicating that randomisation had addressed any between-group bias on all four measures. Each outcome measure was then analysed to compare changes over time (T1 to T2) between the REV, SRA and WLC groups using a three-way mixed ANOVA.

**4.3.5.1 Analysis of non-independence.** As recommended by Kenny, Kashy, and Cook (2006), the data was checked prior to the mixed ANOVA for non-independence between partners. For this analysis, data from four same-sex couples were removed from the data set for study 1d so gender could be used as the distinguishing feature. The remaining 67 couples comfortably surpassed Kenny et al.'s requirement for at least 28 dyads to have sufficient power to test for an effect. As recommended by Kenny et al., data from the 67 heterosexual couples (WLC=25 couples; REV=20 couples; SRA=22 couples) was checked for non-independence between partners using the Spearman Correlation Coefficient. Significant positive correlations were found at both time points, T1 and T2, with regard to all three measures: relationship satisfaction (T1:  $r=.512, p<.001$ ; T2:  $r=.353, p=.004$ ); commitment level (T1:  $r=.469, p<.001$ ; T2:  $r=.366, p=.003$ ); and emotional intimacy (T1:  $r=.435, p<.001$ ; T2:  $r=.495, p<.001$ ). The measure of investment size was not significantly correlated at T1 ( $r=.123, p=.327$ ) but was positively correlated at T2 ( $r=.328, p=.007$ ). These results indicated the need to consider non-independence between partners based on a positive correlation on seven out of eight items. Thus, an analysis of variance was made with the dyad as the unit of analysis.

**4.3.5.2. Effectiveness with regard to commitment level.** Commitment level was measured quantitatively using the seven-item commitment level scale from the global investment model scale (IMS; Rusbult et al., 1998). Effectiveness with regard to commitment level was based on comparing changes in outcome over time in the REV group with changes in outcome over time in the SRA and WLC groups. The descriptive statistics for the study variable of commitment level are reported in Table 4.13. T1 commitment level across all participants was highest in the SRA group, closely followed by the REV and then WLC groups. There were slight differences between males and females for second and third position. T2 commitment level across all participants was highest in the SRA group, followed by the REV group, with lowest scores in the WLC group. A similar profile was observed amongst both male and female participants.

**Table 4.13**

*Study variable descriptive statistics: commitment level*

Gender	Study Condition	Commitment level	
		Time One (T1)	Time Two (T2)
Male	REV	7.24 ( $\pm .72$ )	7.16 ( $\pm .87$ )
	SRA	7.17 ( $\pm 1.10$ )	7.19 ( $\pm 1.22$ )
	WLC	6.98 ( $\pm 1.48$ )	6.93 ( $\pm 1.47$ )
	TOTAL	7.12 ( $\pm 1.16$ )	7.09 ( $\pm 1.22$ )
Female	REV	7.20 ( $\pm 1.23$ )	7.28 ( $\pm 1.18$ )
	SRA	7.37 ( $\pm .93$ )	7.30 ( $\pm 1.19$ )
	WLC	7.14 ( $\pm .89$ )	7.10 ( $\pm 1.08$ )
	TOTAL	7.24 ( $\pm 1.00$ )	7.22 ( $\pm 1.14$ )
Total	REV	7.22 ( $\pm 1.00$ )	7.22 ( $\pm 1.02$ )
	SRA	7.27 ( $\pm 1.01$ )	7.24 ( $\pm 1.20$ )
	WLC	7.06 ( $\pm 1.21$ )	7.01 ( $\pm 1.28$ )
	TOTAL	7.17 ( $\pm 1.08$ )	7.15 ( $\pm 1.18$ )

*Note:* N=134

*Key:*

REV: (Relationship education videos)

SRA: (Shared relationship activity)

WLC: (Wait-list control group)

To examine hypotheses 1a and 1b a three-way mixed ANOVA was performed to look at the interaction between study condition (WLC, SRA & REV), partner (male, female), and changes over time (T1, T2) on commitment level. The analysis performed utilised a 3 (condition) x 2 (partner) x 2 (time) between-within-within study design. Inspection of the boxplot 1 (Appendix O) found some outliers, in the REV and SRA groups. These outliers were not removed as they were only rendered outliers due to a concentration of responses around the median due to generally high levels of commitment throughout the sample. There was homogeneity of variances for three out of four groups, as assessed by Levene's test for equality of variances ( $p > .05$ ). For the three-way interaction effect, Mauchly's test of sphericity indicated that the assumption of sphericity was made by default. No significant effects were found. Therefore, hypotheses 1a and 1b were not supported.

**4.3.5.3. Effectiveness with regard to investment size.** Investment size was measured quantitatively using the five-item investment size scale from the global IMS (Rusbult et al., 1998). Effectiveness with regard to investment size was based on comparing changes in outcome over time in the REV group with changes in outcome over time in the SRA and WLC groups. The descriptive statistics for the study variable of investment size are reported in Table 4.14. T1 investment size across all participants was highest in the SRA group, followed by the REV and then WLC groups. Investment size was consistently highest in the SRA group across both males and females, whereas there were slight differences for second and third positions between males and females. T2 investment size across all participants was highest in the SRA group, followed by the REV group, with lowest scores in the WLC group, with a similar profile observed amongst both male and female participants.

**Table 4.14***Study variable descriptive statistics: investment size*

Gender	Study Condition	Investment size	
		Time One (T1)	Time Two (T2)
Mean (SD)	Mean (SD)		
Male	REV	5.75 ( $\pm 1.21$ )	6.02 ( $\pm 1.12$ )
	SRA	5.98 ( $\pm 1.47$ )	6.45 ( $\pm 1.39$ )
	WLC	5.38 ( $\pm 1.43$ )	5.48 ( $\pm 1.54$ )
	TOTAL	5.69 ( $\pm 1.38$ )	5.96 ( $\pm 1.42$ )
Female	REV	5.55 ( $\pm 1.60$ )	5.59 ( $\pm 1.70$ )
	SRA	5.85 ( $\pm 1.75$ )	6.10 ( $\pm 1.72$ )
	WLC	5.69 ( $\pm 1.24$ )	5.58 ( $\pm 1.18$ )
	TOTAL	5.70 ( $\pm 1.51$ )	5.75 ( $\pm 1.53$ )
Total	REV	5.65 ( $\pm 1.40$ )	5.81 ( $\pm 1.44$ )
	SRA	5.91 ( $\pm 1.60$ )	6.27 ( $\pm 1.56$ )
	WLC	5.53 ( $\pm 1.33$ )	5.53 ( $\pm 1.36$ )
	TOTAL	5.69 ( $\pm 1.44$ )	5.86 ( $\pm 1.47$ )

*Note:* N=134*Key:*

REV: (Relationship education videos)

SRA: (Shared relationship activity)

WLC: (Wait-list control group)

To examine hypotheses 2a and 2b a three-way mixed ANOVA was performed to look at the interaction between study condition (WLC, SRA & REV), partner (male, female), and changes over time (T1, T2) on investment size. The analysis performed utilised a 3 (condition) x 2 (partner) x 2 (time) between-within-within study design. Inspection of the boxplot 2 (Appendix O) found some outliers, especially in the REV group. These outliers were not removed as they were only rendered outliers due to a concentration of responses around the median. There was homogeneity of variances for three out of four groups, as assessed by Levene's test for equality of variances ( $p > .05$ ). For the three-way interaction effect, Mauchly's test of sphericity indicated that the assumption of sphericity was made by default. No significant effects were found. Therefore, hypotheses 2a and 2b were not supported.

**4.3.5.4. Effectiveness with regard to emotional intimacy.** Emotional intimacy was measured quantitatively using the five-item emotional intimacy scale (Sinclair & Dowdy, 2005). Effectiveness with regard to emotional intimacy was based on comparing changes in outcome over time in the REV group with changes in outcome over time in the SRA and WLC groups. The descriptive statistics for the study variable of emotional intimacy are reported in Table 4.15. T1 emotional intimacy across all participants was highest in the SRA group, followed by the WLC group and then the REV group. Emotional intimacy being highest in the SRA group is consistent across males and females. However, there was a slight difference in the pattern between males and females for middle and lowest levels. T2 emotional intimacy across all participants was highest in the SRA group, followed by the REV group, with lowest scores in the WLC group. There was also a slight difference in the pattern at T2 between males and females for middle and lowest levels.

**Table 4.15**

*Study variable descriptive statistics: emotional intimacy*

Gender	Study Condition	Emotional intimacy	
		Time One (T1)	Time Two (T2)
		Mean (SD)	Mean (SD)
Male	REV	3.55 ( $\pm 1.11$ )	3.67 ( $\pm .97$ )
	SRA	4.05 ( $\pm .81$ )	4.06 ( $\pm .93$ )
	WLC	3.78 ( $\pm 1.08$ )	3.80 ( $\pm 1.05$ )
	TOTAL	3.80 ( $\pm 1.01$ )	3.84 ( $\pm .98$ )
Female	REV	3.80 ( $\pm 1.17$ )	4.02 ( $\pm .82$ )
	SRA	4.03 ( $\pm .94$ )	4.15 ( $\pm .99$ )
	WLC	3.74 ( $\pm 1.14$ )	3.79 ( $\pm 1.18$ )
	TOTAL	3.85 ( $\pm 1.07$ )	3.97 ( $\pm 1.02$ )
Total	REV	3.68 ( $\pm 1.13$ )	3.85 ( $\pm .90$ )
	SRA	4.04 ( $\pm .87$ )	4.11 ( $\pm .95$ )
	WLC	3.76 ( $\pm 1.10$ )	3.79 ( $\pm 1.12$ )
	TOTAL	3.83 ( $\pm 1.04$ )	3.91 ( $\pm 1.00$ )

*Note:* N=134

*Key:*

REV: (Relationship education videos)

SRA: (Shared relationship activity)

WLC: (Wait-list control group)

To examine hypotheses 3a and 3b a three-way mixed ANOVA was performed to look at the interaction between study condition (WLC, SRA & REV), partner (male, female), and changes over time (T1, T2) on emotional intimacy. The analysis performed utilised a 3 (condition) x 2 (partner) x 2 (time) between-within-within study design. Inspection of the boxplot 3 (Appendix O) found no influencing outliers. There was homogeneity of variances for three out of four groups, as assessed by Levene's test for equality of variances ( $p > .05$ ). For the three-way interaction effect, Mauchly's test of sphericity indicated that the assumption of sphericity was made by default. No significant effects were found. Therefore, hypotheses 3a and 3b were not supported.

**4.3.5.5. Effectiveness with regard to relationship satisfaction.** Relationship satisfaction was measured quantitatively using the five-item relationship satisfaction scale from the global IMS (Rusbult et al., 1998). Effectiveness with regard to relationship satisfaction was based on comparing changes in outcome over time in the REV group with changes over time in the SRA and WLC groups. The descriptive statistics for the study variable of relationship satisfaction are reported in Table 4.16. Relationship satisfaction at T1 was highest in the SRA group across all participants, followed by the WLC group and lowest in the REV group. A similar profile was observed amongst both male and female participants. T2 relationship satisfaction across all participants was highest in the SRA group, followed by the REV group, with lowest scores in the WLC group. A similar profile was observed amongst both male and female participants.

**Table 4.16***Study variable descriptive statistics: relationship satisfaction*

Gender	Study Condition	Relationship satisfaction	
		Time One (T1)	Time Two (T2)
		Mean (SD)	Mean (SD)
Male	REV	4.49 ( $\pm 2.34$ )	5.24 ( $\pm 1.95$ )
	SRA	5.43 ( $\pm 1.99$ )	5.44 ( $\pm 2.42$ )
	WLC	4.94 ( $\pm 2.54$ )	5.06 ( $\pm 2.38$ )
	TOTAL	4.96 ( $\pm 2.31$ )	5.24 ( $\pm 2.25$ )
Female	REV	4.54 ( $\pm 2.58$ )	5.36 ( $\pm 1.88$ )
	SRA	5.24 ( $\pm 2.02$ )	5.60 ( $\pm 2.03$ )
	WLC	4.70 ( $\pm 2.35$ )	4.88 ( $\pm 2.36$ )
	TOTAL	4.83 ( $\pm 2.30$ )	5.26 ( $\pm 2.11$ )
Total	REV	4.52 ( $\pm 2.43$ )	5.30 ( $\pm 1.89$ )
	SRA	5.33 ( $\pm 1.98$ )	5.52 ( $\pm 2.21$ )
	WLC	4.82 ( $\pm 2.42$ )	4.97 ( $\pm 2.35$ )
	TOTAL	4.90 ( $\pm 2.30$ )	5.25 ( $\pm 2.17$ )

*Note:* N=134

Key: REV: (Relationship education videos)

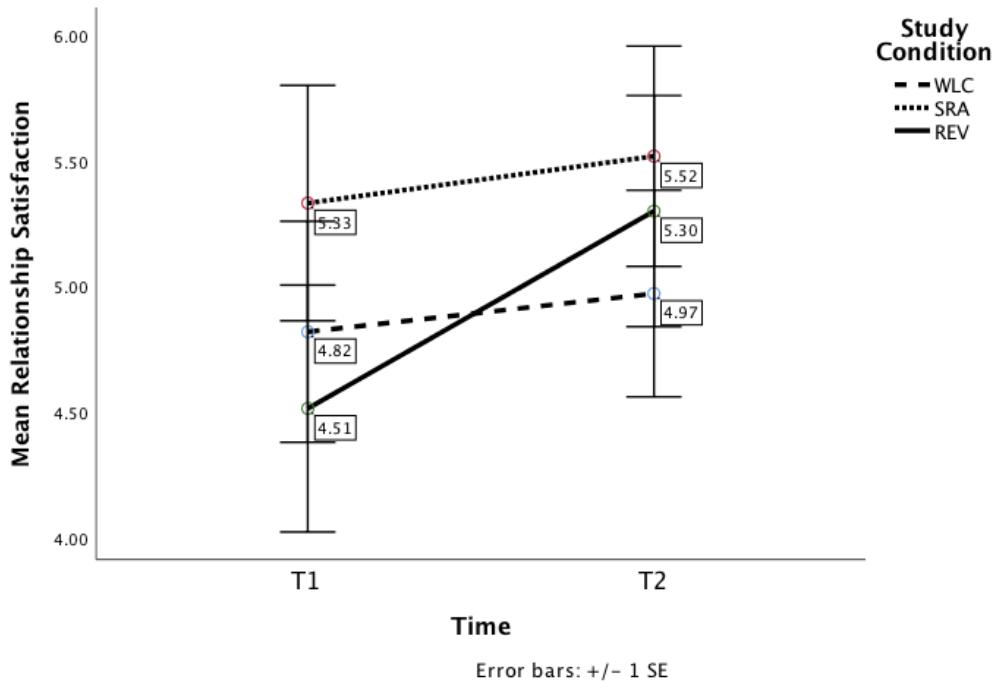
SRA: (Shared relationship activity)

WLC: (Wait-list control group)

To examine hypotheses 4a and 4b, a three-way mixed ANOVA was performed to examine the interaction between study condition (WLC, SRA & REV), partner (male, female), and changes over time (T1, T2) on relationship satisfaction. The analysis performed utilised a 3 (condition) x 2 (partner) x 2 (time) between-within-within study design. There were no outliers, as assessed by inspection of a boxplot 4 (Appendix O). There was homogeneity of variances, as assessed by Levene's test for equality of variances ( $p > .05$ ). For the three-way interaction effect, Mauchly's test of sphericity indicated that the assumption of sphericity was made by default. The results revealed no statistically significant three-way interaction. However, there was a statistically significant two-way interaction effect of time and study condition ( $F(2, 64)=4.31, p=.017$ , partial  $\eta^2=.119$ ). Figure 4.1 shows that the increase in relationship satisfaction between T1 and T2 occurred in the REV group (from 4.51 in T1 to 5.30 in T2), whilst no notable change in relationship satisfaction was observed in the SRA and WLC groups.

**Figure 4.1**

*Changes over time in relationship satisfaction by condition (WLC, SRA, REV)*



To assess whether the observed difference between conditions was statistically significant, a paired sample t-test was performed for each of the three groups (REV, SRA and WLC) to compare dyadic mean scores for relationship satisfaction at T1 and T2. These mean scores and standard deviations were then used to calculate a within-sample Cohen's (1988)  $d$  measure of effect size using a statistics calculator (Calculator Academy, 2020). Whilst no difference in relationship satisfaction was observed between T1 and T2 in the SRA and WLC groups, the difference in the REV group was highly significant ( $t(19)=-3.62$ ,  $p=.002$ , Cohen's  $d=0.19$ ). Therefore, hypotheses 4a and 4b were supported. Cohen suggested that  $d=0.2$  be considered a small effect size, 0.5 a medium effect size and 0.8 a large effect size. Within Cohen's criteria, the effect size of  $d=0.19$  in the present study is small to trivial. However, given aforementioned literature regarding ceiling effects when participants have high baseline scores (see Wadsworth & Markman, 2012; Wang et al., 2008), a further analysis was performed on the 13 couples with relationship satisfaction scores  $<6$  (based on a range of 0–8) in T1. For this analysis, seven couples were removed from the REV data and the observed difference was notably stronger ( $t(12)=-4.304$ ,  $p<001$ ,

Cohen's  $d=0.60$ ). This appears to suggest that the intervention is more effective in less satisfied couples, however, this interpretation is discussed further in Chapter 6.

**4.3.5.6. Overview of hypotheses testing for study 1d.** An overview of hypotheses testing is shown in Table 4.17. This shows that of the eight hypotheses relating to the outcome measures (1a, 1b, 2a, 2b, 3a, 3b, 4a & 4c), only hypotheses 4a and 4b regarding effect on relationship satisfaction are supported. Hypotheses 1a and 1b with regard to commitment level, 2a and 2b with regard to investment size and 3a and 3b with regard to emotional intimacy were not supported. These outcomes are discussed with regard to theory and prior research in Chapter 6.

**Table 4.17**

*Overview of hypotheses testing for study 1d*

Research Questions and Hypotheses	Study 1d: Supported hypotheses
<i>Hypothesis 1:</i> There will be a greater improvement in commitment level between T1 and T2 for the REV group versus a) the SRA and b) WLC groups.	1a and 1b not supported
<i>Hypothesis 2:</i> There will be a greater improvement in investment size between T1 and T2 for the REV group versus a) the SRA and b) WLC groups.	2a and 2b not supported
<i>Hypothesis 3:</i> There will be a greater improvement in emotional intimacy between T1 and T2 for the REV group versus a) the SRA and b) WLC groups.	3a and 3b not supported
<i>Hypothesis 4:</i> There will be a greater improvement in relationship satisfaction between T1 and T2 for the REV group versus a) the SRA and b) WLC groups.	4a supported 4b supported

#### **4.3.6. Study 1e (a, b & c): Future focus**

**4.3.6.1. Introduction to study 1e (a, b & c).** This final study is a content analysis on three specific issues covered in the self-recorded qualitative interviews. For the purposes of simplicity, the study is separated into three parts around the three separate questions, but with each part having a focus on the future. The aim of study 1e(a) was to examine which aspects of the study were likely to have the most lasting impact on participants. Each participant was asked to nominate which

three elements of the programme they felt they would be most likely to remember in a year's time. It is acknowledged that the data is subjective and cannot inform on what participants will actually remember. The aim of study 1e(b) was to examine suggested improvements, based on a specific question addressing this topic in the structured qualitative interview. The aim of study 1e(c) was to see whether the presenter was received as relevant and acceptable across the diversity of the sample regarding age, ethnicity, sexuality and gender. This was not addressed as a specific question as it was felt that the results would be unreliable due to likely social desirability bias resulting from the researcher also being the programme presenter. The data in all three parts of this study was analysed using content analysis to identify and quantify the specific codes relating to a) lasting impact b) areas for improvement and c) presenter issues. The quantified data is presented for each study-part alongside qualitative commentary to add flavour and nuance to the numerical data.

**4.3.6.2. Study 1e(a): Most impactful elements of the programme.** This study examines the aspects of the programme that participants felt would have most lasting impact after a year. The content analysis for this study is presented in the joint display Table 4.18 and shows how the messages from videos one (relationships are created = paper on the floor) and two (investing in relationships = Lego<sup>®</sup>) are considered more likely to be recalled. The most likely message to be recalled is that 'relationships require investment' (75%, n=24), with around two-thirds of the sample mentioning this in relation to the Lego<sup>®</sup> metaphor. This finding raises the issue of why no significant change was noted between T1 and T2 on levels of investment size in study 1d. The qualitative analysis in study 1f provides further insight on this issue and this is discussed and integrated with these mixed findings and the quantitative findings from study 1d in Chapter 6 (Discussion). The second most likely element to be recalled from the programme was the message that 'relationships are created' (63%, n=20) with just under half citing this in the context of the Me-You-Us (paper on the floor) metaphor. It is interesting to note that the two most memorable messages were the ones with the strongest visual metaphors and this is discussed further in the qualitative analysis with regard to the theme of 'metaphors and examples' (Chapter 5). Other aspects of the programme that participants envisage they will still recall after a year are learning to communicate about differences (44%, n=14), taking responsibility for their own

behaviour (25%,  $n=8$ ) and positioning problems as problems rather than positioning people (partner) as the problem (19%,  $n=6$ ). A single quotation is included in Table 4.18 to illustrate the essence of each item.

**Table 4.18**

*Most memorable aspects of the REV after a year*

Most likely to remember	Total mentions $N=32$	Specific mention of metaphor $N=32$	Qualitative comments
Relationships require investment and work: Lego® metaphor (and Cinderella metaphor)	24 (75%)	19 (59%)	<i>I'll remember the Lego® brick.... Creates an atmosphere in which you can talk. Also, sort of light-hearted. (Tom/AF)</i>
Relationships are created / an entity in their own right (ME-YOU-US paper-on-the-floor metaphor)	20 (63%)	15 (47%)	<i>Seeing this piece of paper where the relationship is a separate entity created by both of us and not just two people, two separate individuals. And it's not about trying to change the other person, it's about what we can create together. (Freddie/Relate)</i>
Communication (Differences are valid & learn to listen more to each other)	14 (44%)	-	<i>Looking at understanding that we both have a point of view and try to understand those thoughts and feelings and what the issues are. (James/Relate)</i>
Take responsibility for impact of our (my) behaviour (psychiatrist couple example)	8 (25%)	-	<i>This couple who had to wait for marriage counselling and so they decided to act like they loved each other and then three months later they did love each other again. So that was really powerful. Really powerful. Again, it's just an anecdote, but that is the kind of thing I remember. (Barbara/AF)</i>
Problems are problems (rather than positioning partner as the problem)	6 (19%)	-	<i>The thing is the problem, not the person. And I think that will have the most lasting impact on me because it kind of defines how you handle conflict.... rather than thinking 'my partner is annoying', I'm now thinking what my needs are in this situation and what are his needs. Ok – they don't match. That's the problem. How can we meet both of our needs in a way that we're both happy with? That's been really helpful. (Sally/AF)</i>

**4.3.6.3. Study 1e(b): Suggested improvements to the programme.** This study examines a specific question within the qualitative interviews on suggested improvements. Very few participants spontaneously suggested improvements to the programme during their interviews, indicating that improvements were not top-of-mind for most participants. However, towards the end of their interviews the 32 participants were each asked to nominate any ways in which they felt the programme could be improved. The responses to this question were analysed using

a content analysis and were coded into different categories of nominated improvement. The content analysis for this study is presented in the joint display Table 4.19, along with selected qualitative comments to illustrate each category of improvement. Table 4.19 shows that five participants had no suggested improvements. Almost a third ( $n=10$ ) of participants wondered whether a greater number of shorter and more focused videos might be preferable. However, it should be noted that when answering this question, the majority of participants ( $n=20$ ) emphasised that, even where they could suggest improvements, they felt that the number and content of the videos was fine as it stood, as illustrated in the following quotes:

“I think the format, content, number of videos, video length and discussion points were all fine.” (Arjan/Relate)

“I liked the format, that was good. I thought the video was good – not too long and it’s not too short.” (Kirstie/Relate)

However, on prompting about suggested improvements, the main issue raised by around a third ( $n=10$ ) of participants related to the challenge of absorbing the volume of information presented. These participants felt that a longer programme of more, but shorter, videos might be preferable. These tended to be the participants from the Relate group, whereas participants in the AF group felt that a longer programme would be off-putting, and instead suggested on-screen visualisations summarising key points ( $n=4$ ) or an accompanying workbook or printed summaries ( $n=5$ ). Another suggested improvement from a quarter of the sample ( $n=8$ ) was that more structure in terms of discussion points and activities would have been desirable. However, this is contrasted with the majority who described liking the non-directive format. A final area of improvement was to provide a structure for follow-up and maintenance, raised by participants ( $n=8$ ) who felt that it might be challenging to maintain the changes they had started to implement.

**Table 4.19***Suggested improvements to the REV*

Suggested improvements	Total mentions N=32	Qualitative comments
Nothing that could be improved	5 (16%)	<i>I thought it was excellent, I was really impressed with how the programme was. I think the format worked well, the content and topics were great. (Aiden/Relate)</i> <i>There was nothing that could be improved, it was much better than I expected. (David/Relate)</i>
More (shorter) videos	10 (31%)	<i>Perhaps twice as many videos but half as long... I felt that sometimes there was a lot to make sense of. (Peter/AF)</i> <i>It covers a lot of ground quickly, so could benefit from being more spread out, say over five sessions. (Les/Relate)</i> <i>I think maybe the videos were a bit too long – they were so crowded with information that it was a bit much to take in.... more videos with less information in each of them might have made our conversations more focused. (Daniel/Relate)</i>
More structured homework / exercises	8 (25%)	<i>Looking at understanding that we both have a point of view and try to understand those thoughts and feelings and what the issues are. (Freddie/Relate)</i> <i>More guidance on what we should be talking about and discussing during or post the videos... maybe even a discussion guide. (Shreya/Relate)</i> <i>It would have been helpful to have the discussion points or questions in front of us. (Barbara/AF)</i>
Follow-up afterwards for maintenance	8 (25%)	<i>Some follow-up would be really useful as it will be challenging to maintain. (James/Relate)</i> <i>We really want to keep going with this, so on-going reminders would be good and top up videos. (Mandy/Relate)</i>
Printed notes or workbook	5 (16%)	<i>I guess the only thing would be like a, not a workbook, but something that you could work through after the videos if you wanted to. We just got a pen and paper and wrote down lots of stuff. (Kirstie/Relate)</i>
Include visual illustrations	4 (13%)	<i>I thought it was very good but I wonder whether you could illustrate some of the points you were making with some imagery or videos. (Ernie/AF)</i>
Some personal contact with a therapist (Relate only)	4 (13%)	<i>A combination of this plus counselling would be the way to go. (Cai/Relate)</i>
Others (single mentions)	9 (28%)	Male & female presenters / Summary screen at end/ More focus on emotions/ More time between videos/ Longer videos. Delete 3rd video (“samey”)/ Follow-up after 6 months/ More case studies / Reduce to 1 video

**4.3.6.4. Study 1e(c): Presenter issues.** This study examined the transcripts for any spontaneous feedback about presenter-related issues that might impair the diverse appeal of the programme. Comments were examined using content analysis with regard to presenter age, gender, ethnicity or sexuality or any other unforeseen characteristic. Table 4.20 below shows that the majority of participants (66%,  $n=21$ ) raised no issues in response to the profile of the presenter, with the numerical data shown alongside selected qualitative commentary. Most of the remaining participants (28%,  $n=9$ ) made some reference to the diverse appeal of the programme. However, it should be acknowledged that whilst there was some representation of diversity in terms of ethnicity and sexuality, the sample norm was white, heterosexual couples. There were two comments (6%) upon specific prompting about ways to improve the diverse appeal of the programme. One male participant suggested that it might have been helpful to have both a male and female presenter. Another in a same-sex relationship mentioned that more case studies relevant to gay couples would have been of interest.

**Table 4.20***Presenter-related issues*

Presenter-related issues	Total mentions N=32	Qualitative comments
Nothing mentioned (re age, ethnicity, gender, sexuality)	21 (66%)	<p><i>No-one wants to be seen as vulnerable, especially men ... I think men will find it more difficult to do this programme but I think it's really suitable for men even though it's presented by a woman. If you had a gay couple, I mean, as I say, they're people and people are just people and the same issues are going to crop up.</i> (John/AF)</p>
Nothing negative mentioned, but some reference to the general appeal of the programme to a diverse audience	9 (28%)	<p><i>I thought 'this is definitely coming from a woman's perspective' but when I said that to my husband, he didn't think so at all.</i> (Amy/AF)</p> <p><i>I think probably there is a gender difference in how the programme is experienced because I feel that women are much more committed to exploring and talking about a relationship in detail in a way that men, certainly of my elderly age, aren't, although we're committed to the relationship.</i> (Ernie/AF)</p>
Could reflect more diversity	2 (6%)	<p><i>I was actually quite surprised because as a gay couple I did expect it to not really fully reflect us as there obviously aren't any females in the relationship. But it worked absolutely fine and I've, kind of, realised there's absolutely no difference at all really in the way relationships work, whether it's gay or straight. And I was really pleased, actually, it wasn't too geared towards a, kind of, male/female relationship, it wasn't geared towards heterosexual couples as I've found quite a lot of counselling often is and counsellors often only have experience or most of their experience is in heterosexual relationships. And I really liked the fact that I didn't really notice.</i> (Aiden/Relate)</p> <p><i>I think it's absolutely fine for both males and females ... I didn't feel it was particularly from a female point of view or a male point of view, which I think could have easily happened.</i> (Sarah/AF)</p> <p><i>I would say more that, um, it might be nice, as we're a gay couple, that perhaps you could give some examples or maybe tailor part of the video or even a separate video to gay relationships.</i> (James/Relate)</p> <p><i>It might also benefit from having both male and female presenters, perhaps, just to make it a bit more inclusive. It wasn't really a problem for me but I could see that it might be for some chaps.</i> (Les/Relate)</p>

## Chapter 5. Qualitative Results

### 5.1 Introduction

This chapter reports on study 1f, a qualitative thematic template analysis of 31 short, self-directed audio interviews with a total of 32 individuals (one couple jointly recorded). The 32 participants were recruited from two sample pools (19 Relate and 13 As Found; AF) with 18 males and 14 females. Missing interviews were primarily within the AF sample (AF=13; Relate=1) based on a decision by the researcher to stop requesting qualitative interviews at the point of data saturation. Only 5:23 couple relationships in the REV group had no representation in the qualitative feedback (AF=4; Relate=1). Whilst it is still uncommon to use qualitative methods alongside experimental methods in the evaluation of complex healthcare interventions (Lewin et al., 2009), it is nonetheless desirable when evaluating feasibility (Sidani, 2016). The overarching and qualitative research questions for the present study 1f were as follows:

***Overarching research question:*** How and in what ways does the brief REV programme have potential as a universal intervention to support and improve couple relationships?

***Qualitative research question:*** What are the experiences of individuals participating in the REV programme?

It is noted that one approach to the qualitative analysis in study 1f could have utilised social exchange theory (Thibault & Kelley, 1959), the investment model of relationships (IMR; Rusbult, 1980a) and the interpersonal process model (IPM) of intimacy (Reis & Patrick, 1996; Reis & Shaver, 1988) as theoretical lenses through which to examine the interviews, as these theories had informed the eight hypotheses (1a, 1b, 2a, 2b, 3a, 3b, 4a & 4b) in study 1d. However, the approach to analysing the qualitative data was reviewed following analysis of study 1d, where only two of these eight hypotheses were supported (4a & 4b). The two supported hypotheses were that there would be a greater improvement in relationship satisfaction between T1 and T2 for the REV group versus 4a) the SRA group and 4b) the WLC group. In light of the other six hypotheses not being supported (see Table 4.18), the researcher decided that using the deductive lenses of social exchange theory, the IMR and the IMP would constrain rather than open up

understanding about how the intervention was working. Instead, the researcher considered that an inductive analysis would be more useful to understand the process(es) of change underpinning the supported hypotheses 4a and 4b. The philosophical lens of pragmatism (see Section 3.5) was used to discern only those themes of practical utility in answering the overarching research question.

A full description of the qualitative analytic strategy can be found in Section 3.11.3. However, in summary, the researcher listened to all interview recordings three times and then the first six received transcripts were coded. Codes from these six interviews were formulated into an initial thematic template relevant to the overarching and qualitative research questions. The remaining interviews were then coded to develop and refine the template. It is noted that a fuller description of the qualitative results may form the basis of a future report, but is beyond the scope of this mixed methods DPsy thesis. The emphasis in study 1f was therefore to identify and describe the overarching themes, sub-themes and level-3 themes (where appropriate). Figure 5.1 presents a summary of the key demographics for the individuals included in this qualitative analysis, using pseudonyms to protect their anonymity. Each participant recorded their audio interviews in private and transcripts were initially analysed individually. However, in the reporting they have also been considered dyadically to increase validity of responses between partners and to provide a more complete picture of the interpersonal dynamics of participating in the intervention. All identifying details have been removed from reporting and ‘....’ refers to a section of text being omitted within a quote, either for clarity or economy. Statements in [brackets] are to provide clarity.

Whilst the qualitative analysis was conducted independently from the quantitative analysis, there is some integration of the T1 and T2 measures for relationship satisfaction in the reporting to contextualise findings. Thus, reporting about ‘scores for relationship satisfaction’ refers to the mean score for participants based on the five-item relationship satisfaction scale from the global investment model scale (IMS; Rusbult et al., 1998). This nine-point IMS Likert scale for relationship satisfaction ranged from 0–8, with 0 indicating the lowest level of relationship satisfaction and 8 indicating the highest level.

**Table 5.1***Demographics of 32 participants in qualitative sample*

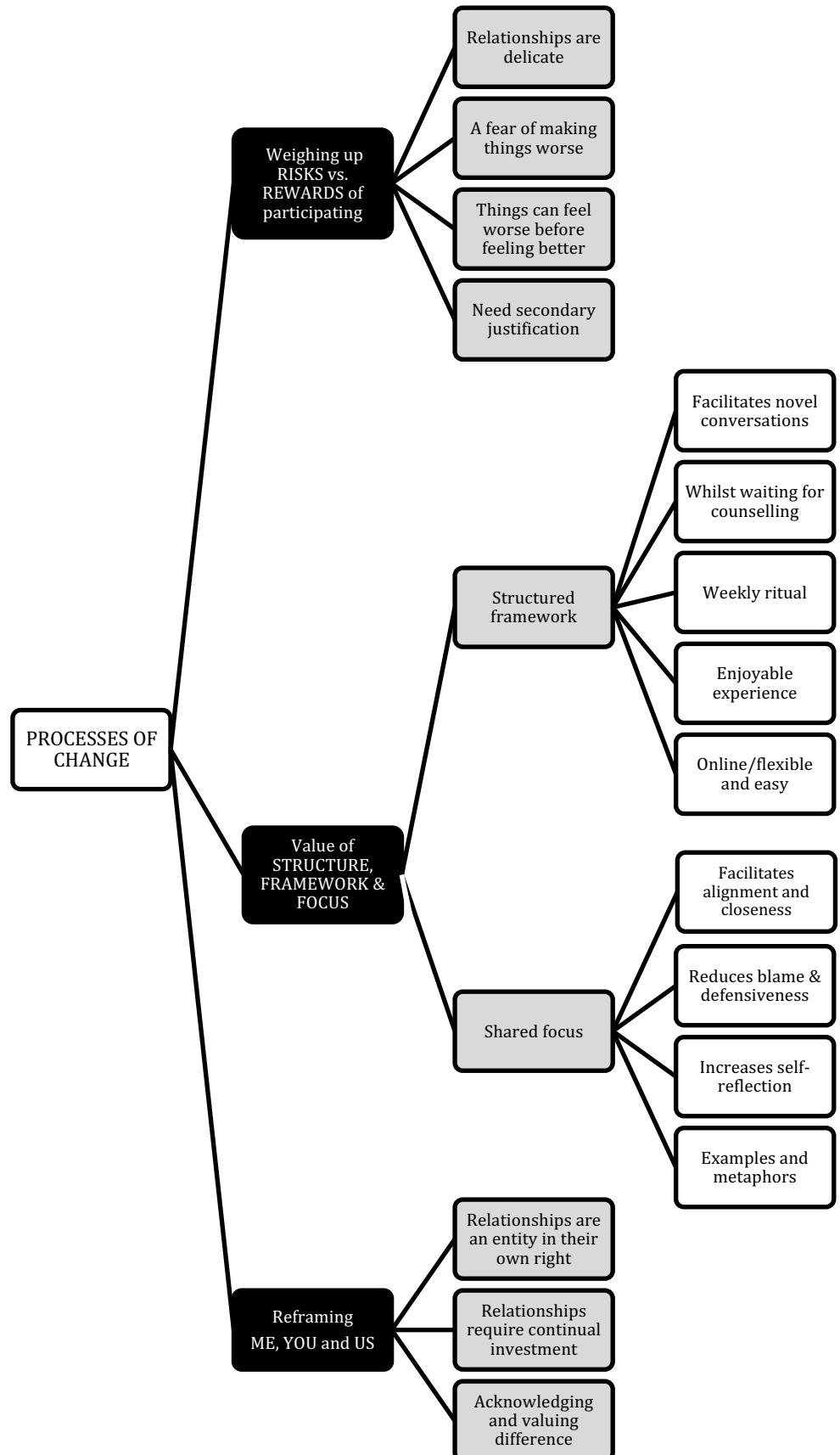
Pseudonym	Gender	Age	Ethnicity	Sexuality	Relationship status	Years together	Relationship satisfaction score (0–8)	
							T1	T2
Simon	M	33	White	Hetero	Married	14	1	2.4
Lucy	F	35	White	Hetero			2.8	3.8
Shreya	F	22	Asian	Hetero	Married	3	2.4	2.8
Arjun	M	23	Asian	Hetero			1.8	2.4
Carol	F	47	White	Hetero	Married	18	1.4	1.4
Daniel	M	46	White	Hetero			3.8	4.0
Cai	M	26	Asian	Hetero	Married	3	1.8	2.4
Aya	F	27	Mixed	Hetero			4.8	6.0
Les	M	46	White	Hetero	Married	23	2.4	3.6
Kirstie	F	48	White	Hetero			3.4	5.4
Angie	F	36	White	Hetero	Married	20	0	4.0
Carl	M	37	White	Hetero			1.0	4.2
Caroline	F	41	White	Bisexual	Married	20	3.2	5.2
Ahmed	M	41	Asian	Hetero			3.2	4.6
Aiden	M	47	White	SS	Co-habiting	16	4.8	5.0
Freddie	M	40	White	SS			4.6	4.0
David	M	41	White	SS	Co-habiting	9	5.0	7.2
James	M	38	White	SS			4.0	5.6
Charlie	M	52	White	Hetero	Married	31	7.6	7.2
Tom	M	38	White	Hetero	Married	15	6	6
Sarah	F	36	White	Hetero			5.2	5.2
Peter	M	62	White	Hetero	Married	27	6.8	6.8
Mandy	F	57	White	Hetero			7.4	7.0
Brandon	M	27	White	Hetero	Co-habiting	2	8.0	7.8
Amy	F	26	White	Hetero			7.2	6.8
Sally	F	61	White	Hetero	Living separately	11	5.8	7.2
John	M	61	White	Hetero			5.6	6.6
Ernie	M	67	White	Hetero	Married	40	7.6	7.8
Irene	F	65	White	Hetero			7.2	7.4
Charlene	F	39	Black	Hetero	Married	8	6.1	7.2
Barbara	F	58	White	Hetero	Married	34	8	7.8
Harry	M	56	White	Hetero			7.1	7.8

*Key:*

SS = same sex

Hetero = heterosexual

**Figure 5.1**  
*Final thematic template*



## **5.2 Results of thematic template analysis**

The final template of themes is shown in Figure 5.1. This displays the three overarching themes identified as 1) weighing up risks and rewards, 2) value provided by structure, framework and focus, and 3) reframing me, you and us. Each of these overarching themes is now described in turn, expanding on the meaning of the sub-themes and level-3 themes (where appropriate).

### **5.2.1. Theme 1: Weighing up the risks versus rewards of participating.**

The first overarching theme identified in the qualitative analysis is that individuals weighed up the risks versus rewards of participating in a research study that involved a relationship education programme. This theme is widely mentioned ( $n=28$ ) and Barbara articulates the essence of the theme, as follows:

“It felt quite risky to take part in this research as you never quite know what is going to happen and whether your relationship is strong enough to cope.” (Barbara/AF)

Barbara (58) and Harry (56) have been married for 34 years and recorded very high baseline levels of relationship satisfaction (8 and 7.1 respectively). Barbara explains how this helped them decide to participate because “we were in a good place and so decided to give it a go”. However, Barbara’s mean score reduced slightly between T1 and T2 (from 8 to 7.8), whereas Harry recorded a slight increase (from 7.1 to 7.8). Despite this reduced score, Barbara described the REV programme as “really helpful”, mainly because “it made us more conscious of the way we talk to each other”. Harry also felt “the experience of participating was really good, very positive” and that “the impact that it’s had on our relationship has been to make us focus again on the relationship and how we build it”. As indicated by Barbara and Harry, baseline relationship satisfaction appears relevant to how couples weigh up the risks and rewards of participating.

Other couples with high baseline levels of relationship satisfaction also felt they had little to lose by participating, as described by AF couple Sarah (36) and Tom (38), both white and married for 15 years. Sarah described how they were “in quite a good place relationship-wise” before starting REV, with both having moderate to high mean relationship satisfaction scores at T1 (Tom at 6 and Sarah at 5.2) which didn’t alter between T1 and T2. Sarah described that she “didn’t have

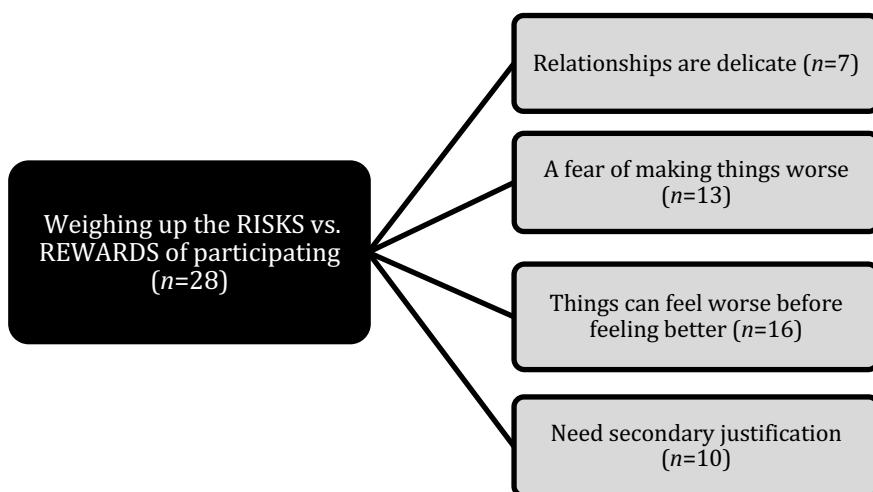
any preconceptions” about the REV but that they’d decided to participate because “we just thought we could learn some stuff and that’s great, but if you don’t then you haven’t lost anything”.

At the other end of the spectrum, couples such as Angie (36) and Carl (37), both with very low relationship satisfaction, also weighed up that they had little to lose by participating. Carl described how he had felt nervous “because you just don’t know what’s going to happen, but we felt we had nothing to lose”. Angie and Carl have been married for 20 years and participated whilst waiting for Relate counselling. Both experienced notable increases in mean relationship satisfaction between T1 and T2 (Angie from 0 to 4; Carl from 1 to 4.2). Angie described how “I had no idea what to expect initially”, although she went on to describe feeling “pleasantly surprised. It was easier than I thought it was going to be, less invasive and involved and much more of a positive experience than I initially thought.”

The four sub-themes within the overarching theme of risks and rewards are summarised in Figure 5.2. The four themes are: ‘relationships are delicate’ ( $n=7$ ); ‘a fear of making things worse’ ( $n=13$ ); that things ‘can feel worse before they feel better’ ( $n=16$ ) and ‘need secondary justification’ ( $n=10$ ). Each sub-theme is now described in more detail.

**Figure 5.2**

*Theme 1: Weighing up the risks versus rewards of participating*



**5.2.1.1. Relationships are delicate.** This theme that ‘relationships are delicate’ captures feedback from participants ( $n=7$ ) who expressed a sense that

relationships are simultaneously both vulnerable and precious. Mandy mentions that “even if things seem to be ticking along quite nicely, you never know what might come out of exposing something as delicate as a relationship to the light of day”. Mandy (57) has been married to Peter (62) for 27 years and both have high baseline levels of relationship satisfaction (Peter 6.8; Mandy 7.4). However, whilst Peter’s mean score for relationship satisfaction remained unchanged at 6.8 between T1 and T2, Mandy recorded a slight decrease from 7.4 to 7.0. This appears to reflect that Mandy may have previously avoided some conversations through a “trepidation” about discussions that might “open up a can of worms”. However, she described how the REV “gave us pause for thought, particularly about how we tackle problems and how we are about talking about problems”.

This theme that ‘relationships are delicate’ appears to underlie why some couples might prefer not to expose their relationships to the scrutiny of relationship therapy or relationship education. Sarah (AF) mentioned that prior to completing the REV she had believed that “relationships don’t bear too much scrutiny” and James (Relate) described how he “wasn’t sure what would happen if we looked too closely at our relationship”. Whilst these comments reflect some generalised views about relationships, it is clear from the context of each interview that individuals are only raising this where they have a sense that their own relationship might be vulnerable if scrutinised too closely. This links to the next sub-theme within risks and rewards, where individuals fear that looking at their relationship too closely could make things worse rather than better.

**5.2.1.2. *Fear of making things worse*.** The qualitative analysis identified that some individuals ( $n=13$ ) experienced a ‘fear of making things worse’ as a result of participating in the REV. This theme was most evident when individuals were articulating their preconceptions and initial thoughts about the intervention. Almost a third of participants ( $n=9$ ) indicated a level of “trepidation” or “apprehension” about participating, which coalesces into a “fear that it might make things worse rather than better” (Amy/AF). Simon may be indirectly expressing his own fears when he says “it’s quite possible that some people could use this … and find that their relationship doesn’t have a future”. Underpinning this fear of making things worse is the idea that the programme might be ‘invasive’ (a word used by four participants) or that discussions could escalate into arguments. Peter (Mandy’s

husband) articulates the typically expressed fear of making things worse, as follows:

“I think my initial trepidation was that it might be invasive and that we might be asked to think through, sort of, private thoughts and that this in itself might be a cause of conflict.”  
(Peter/AF)

Similar comments were noted across a range of participants, not always from both partners in the same relationship, nor from any particular gender. The fear of making things worse appears to have been reinforced by the theme that relationships are delicate (and can thus be easily destabilised) and an uncertainty of the unknown. The couples in the present study were not provided with detailed information about the specific content of the videos and around a third of participants ( $n=11$ ) described an initial nervousness resulting from this uncertainty. Peter (partner of Mandy) explains how “we didn’t know what was about to happen, which I think always makes you fear the worst”. Kirstie (partner of Les) also described her initial apprehension:

“At first, I felt a bit of apprehension about what it was going to be like and, I don’t know, nervous .... Hopefully it’s going to help improve our relationship, but mixed thoughts and feelings beforehand, I guess you don’t know what it’s going to be like.” (Kirstie/Relate)

Whilst quite a few participants expressed an initial hesitancy, these fears were widely allayed as a result of participating in the programme. Tom described how “there was a lot more to be taken from the programme than I would have thought at the outset... the overall experience of participating was very positive”. Notably, the qualitative interviews only captured feedback from couples who weighed up the risk in favour of participation, so the present study cannot tell us about those who weighed up the same risks and favoured non-participation.

**5.2.1.3. *Things can feel worse before they feel better.*** As well as fearing that things may get worse as a result of participating in the programme, a theme

was identified with 16 participants that ‘things may feel worse before they feel better’. This corresponds with previous research findings that relationship satisfaction can temporarily decrease as communication improves and more difficult topics are addressed but not yet resolved (Dindia & Tinnerman, 2003). The theme was experienced similarly by both male and female participants and amongst both AF and Relate participants. Tom described how “it was challenging at times to discuss the content” and goes on to say “there are two different ways you can be. The programme is helpful if you want to understand and improve and it’s not so helpful if you want to continue dreaming on in your own reality.”

Kirstie (48) and her partner Les (46) completed the programme whilst waiting for their first counselling appointment with Relate. Both experienced notable increases in their relationship satisfaction scores between T1 and T2 (Les from 2.4 to 3.6 and Kirstie from 3.4 to 5.4) but they initially found the experience uncomfortable. Kirstie described how “we haven’t sat down and talked to each other for such a long time, so that was difficult being honest, but we both made an effort to be honest, and I realised a few things that I hadn’t before.... in some parts it was really quite difficult, but it was extremely useful”.

This theme that things may feel worse before they get better was also expressed by Angie (partner of Carl), who described how “I found it awkward initially, I found it embarrassing, I found it difficult to face. But it broke barriers and became easier and it made for better communication afterwards.” Towards the end of her interview, Angie described how the REV had “provided hope that all is not lost”. She described how having “an outsider giving us direct support, direction, advice, help and being very understanding and sympathetic was really helpful” along with “being forced to spend time together carrying out activities and completing the homework which was really beneficial”.

Another participant, Charlene (39; AF), a black heterosexual woman who has been married for eight years to Alex (he did not complete an audio interview), described initially feeling “a little awkward, a little bit exposed maybe”. Despite this, Charlene went on to describe how the REV was “helpful because it allowed my husband and myself to talk about areas that we hadn’t actually talked about together before and to work out what each other was thinking and explore a bit more of what we wanted in our relationship”.

Relate couple Aya and Cai also experienced things feeling uncomfortable before they improved. Aya (27) is a mixed race woman who has been married to

Cai (26) for three years. Aya described how the REV gave her and Cai “the ability to identify our issues and talk about them .... and that gave us a deeper sense of the problems we face in our relationship and the issues we need to work on”. Whilst this sounds uncomfortable, both Cai and Aya reported notable increases in their mean relationship satisfaction scores between T1 and T2 (Cai from 1.8 to 2.4 and Aya from 4.8 to 6.0). Aya contextualises these improvements by explaining how the programme gave them “a little bit of a sense of calm and understanding, maybe a deeper understanding”.

A white heterosexual AF couple who experienced initial discomfort were Ernie (67) and Irene (65), who have been married for 40 years. Both experienced nominal increases in their relationship satisfaction between T1 and T2 although very high baseline scores presented little room for movement (Ernie increased from 7.6 to 7.8; Irene from 7.2 to 7.4). Although their scores increased, Ernie described how it was initially “slightly uncomfortable” to watch the videos together but “we were able to nod to each other and pick up where we agreed with something, or to raise a question mark over something we wanted to talk about”. Ernie described how “learning to be much less judgemental” was one of his main gains from the programme, as well as learning “that we need to listen to each other properly and not try to win every argument”. Irene also described how “it was a little bit challenging” but nonetheless useful because “it made us think about how we were perhaps slipping into not being terribly mindful of each other”. Behaviour change was relevant to the improvements experienced by this couple, with Irene describing how “we could see that we were both trying to act differently as a result of our discussions”.

Relate couple Carol (47) and Daniel (46) have been married for 18 years and both described how the programme initially felt uncomfortable, even though it had been helpful to them. Daniel’s mean score for relationship satisfaction increased slightly between T1 and T2 (from 3.8 to 4) and his wife Carol described how Daniel “didn’t want to do it at all” but that “the videos really helped him to think about what it was that we needed to go through and what wasn’t great about our relationship and that was really helpful, a kind of joint realisation”. Daniel agrees that he “was reluctant at first”. Carol’s relationship satisfaction scores remained low at 1.4 between T1 and T2 and Daniel notes that “after the videos she was a bit reluctant to take advice and to try to do things differently”. Carol corroborates this view, saying that her lack of improvement “could be down to me

as much as anything. I find it easier to talk when someone else is there”. But despite this, Carol described how “it was useful to realise we were struggling”. So, this Relate couple concluded that the programme had been helpful in bridging the gap before counselling, but did not act as a substitute to seeking professional help for their difficulties.

**5.2.1.4. Need secondary justification.** The final sub-theme when ‘weighing up the risks versus rewards of participating’ is the apparent need by some participants for a secondary justification to participate. This theme was mentioned by ten participants, occasionally in isolation ( $n=3$ ), but more commonly alongside a relationship-focused rationale ( $n=7$ ). All mention of secondary justification was by male participants. Six male participants expressed their rationale for participating as a desire to contribute to research, such as Brandon who described how “relationship research is a great way to improve the world at large because broken relationships can have so many knock-on effects”.

Another less frequently mentioned justification for participation was to help others. James described participating because “my partner really wanted to, so I agreed” and Tom framed his decision to participate “as a favour for a [male] friend at work”. Tom later described how his subsequent positive experience of the REV programme had countered his preconception that relationship support “was aimed at people who had relationships that were lost and perhaps weren’t working very well”.

The finding that gender influences how individuals are likely to engage with CRE is widely reported in the literature (see Van Acker, 2008; Wadsworth & Markman, 2012). Several male participants expressed that “getting help for your relationship feels like admitting failure” (Ernie/AF) and this was most notable amongst the AF sample, perhaps because the Relate participants had already made the active decision to seek help with their relationship. Whilst only mentioned overtly by a few participants ( $n=4$ ), this appears to represent a latent fear of failure that may explain why some individuals, particularly men, resist or delay engaging in relationship support. This fits with literature finding that males associate stigma with seeking help for their relationship (Clement et al., 2015; Mansfield et al., 2005; Skogrand et al., 2010; Vogel et al., 2006).

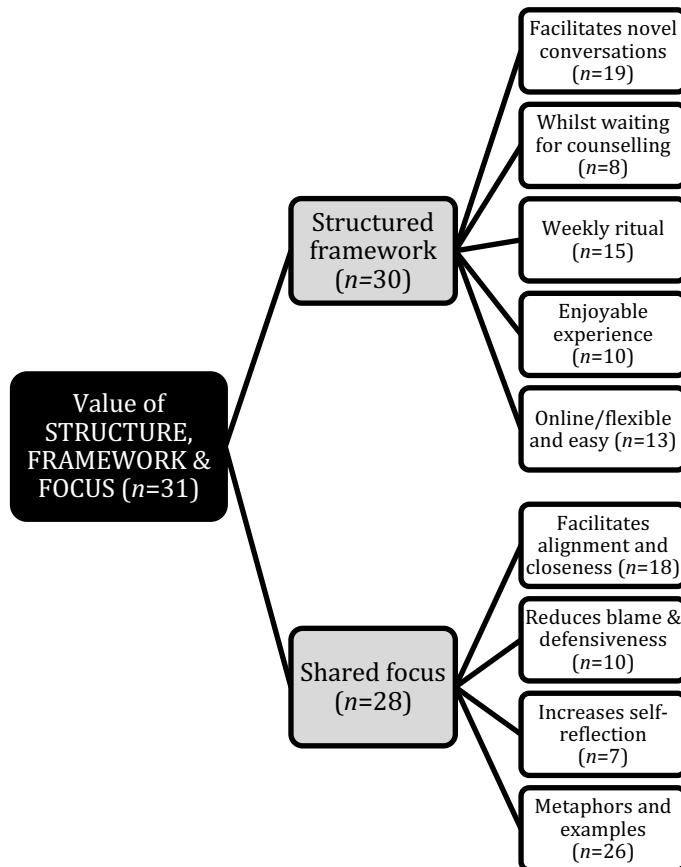
#### **5.2.1.5. Reference point for evaluating risks and rewards of participating.**

One of the notable findings in the overarching theme of risks and rewards is that individuals tend to reference their present relationship when weighing up the risks and rewards of participating in the REV intervention. For instance, Mandy says “in a long relationship you can easily take the other person for granted, and this made me really think about the way we used to treat each other compared to how we do now”. Another participant, Les, echoed comments from other participants ( $n=7$ ) when he described the value of the programme as reminding him of “how much effort we used to make and I hadn’t thought about that as a reason why things don’t feel so great anymore”. This finding that couples reference their own relationship is notable when considering the broader study context of social exchange theory that posits comparison levels with either previous or other relationships, but not the present partnership. As reported throughout this section, it is by referencing the past history of their relationship that couples weigh up the risks and rewards of participating and whether this will make things better or worse.

**5.2.2. Theme 2: Value of structure, framework and focus.** The second main theme identified was that of ‘the value of structure, framework and focus’ provided by the programme. This theme captures the various different ways in which almost all participants ( $n=31$ ) expressed how the structure, framework and focus of the programme had been helpful in facilitating the couple to work on their relationship. There are two sub-themes within this overarching theme, as illustrated in Figure 5.3. These are firstly ‘structured framework’ and secondly ‘shared focus’.

**Figure 5.3**

*Theme 2: Value of structure, framework and focus*



**5.2.2.1. Structured framework.** The theme of ‘structured framework’ was mentioned by almost all participants ( $n=30$ ) and captures how participants felt the programme structure and framework helped them think about and discuss their relationship in a way that was novel and constructive. Relate couples also mentioned that it filled the gap whilst waiting for counselling. Daniel (mentioned earlier as having a notable increase in his relationship satisfaction scores) described how the programme gave him and Carol “an opportunity to start discussing some issues in a more orientated and structured way”. Kirstie, who had hoped the programme would improve her relationship with Les, described how:

“It’s had a really good impact on how we feel about each other, but also it’s made us both really think about what was happening.... the structure really helped as we’ve just been too busy and we’ve, sort of, forgotten to speak to each other.” (Kirstie/Relate)

This theme of ‘structured framework’ comprises four level-3 themes. These are described in more detail below, but in summary they are: ‘facilitates novel conversations’ ( $n=19$ ); ‘whilst waiting for counselling’ ( $n=8$ ); ‘weekly ritual’ ( $n=15$ ); ‘enjoyable experience’ ( $n=10$ ), and ‘online / flexible and easy’ ( $n=13$ ). Twenty-eight participants mentioned the second sub-theme – that the videos provide a ‘shared focus’. This theme captures feedback that couples found it easier to connect and discuss issues as a result of the videos as a reference point, rather than responding or reacting directly to each other. Within this theme are four level-3 themes: ‘facilitates alignment and closeness’ ( $n=18$ ), ‘reduces blame and defensiveness’ ( $n=10$ ), ‘increases self-reflection’ ( $n=7$ ) and ‘metaphors and examples’ ( $n=26$ ). Each level-3 sub-theme is now described in more detail.

*5.2.2.1.1. Facilitates novel conversations.* This theme captures feedback that the programme facilitated couples to have novel conversations about their relationship. Participants ( $n=19$ ) described how the structure and framework provided by the REV programme helped couples to have conversations they had not previously had, or had not had for many years. Considering this within the context of social exchange theory, it is notable that when participants are reflecting here, they exclusively reference times earlier in their present relationship rather than making comparisons with previous or other relationships. For example, Sarah describes how “looking back I can see that we have never really talked openly to each other”. Sarah described how the REV had helped her and husband Tom “to discuss our relationship openly and learn the best way how to do that”. Tom’s response corroborated Sarah’s experience:

“I don’t necessarily think it’s the kind of full and frank discussion, truthful and honest that we have on a regular basis .... I definitely think it was beneficial to have a conversation where you actually look at your relationship and see where you want to go and what you’re doing. That’s just not something we’ve ever done before.” (Tom/AF)

Not only does this theme capture the novelty for couples of discussing their relationship, it also captures how the programme structure facilitated these novel conversations. Kirstie (who is on the Relate waiting list with husband Les)

described how “we’ve both been trying to be honest about what makes us happy, and what makes us unhappy, and it’s made us sit down and talk”. Les concurred, describing how the programme had “helped me and I think it’s helped my partner to be more open about our feelings in general and about each other, which has been useful”. This helps explain the increases in relationship satisfaction reported by both Kirstie and Les. Kirstie described how “the first week we sat on either end of the sofa.... but by the third week we watched the video in each other’s arms.... We were more open to more understanding and less defensive.” Kirstie went on to explain how “since we’ve had children .... we’ve sort of, forgotten to speak to each other. And this programme has really made us think about what we both want and we’ve both realised that we want the same things and it’s got us talking together a lot more.”

As with Kirstie and Les, many participants ( $n=13$ ) specifically described how the programme had helped them to be more open and honest with each other. Carol (partner of Daniel) described how the programme “helped us think about what we needed, and my husband really found it helpful as a way of opening up, it was a sort of framework”. Daniel echoed Carol’s view that the programme “helped us have conversations we were not prepared for, or we couldn’t find out how to [have], so it gave us a more focused approach to start having more meaningful conversations and to move forward”.

Discussing their relationship was a notably unusual experience for many of the participants, with Mandy (partner of Peter) describing how “it is quite rare, if not unheard of, for us to talk about our relationship and perhaps that’s something we need to find time to do more often. And the structure of the programme made it easy for us to do this and I don’t think we’d ever have done it otherwise.” Peter concurs that the REV “was helpful because it raises the possibility that you could actually just talk about things rather than letting them happen. That doesn’t sound very profound but it’s pretty important.”

Another participant, Charlie (52), who has been married for 31 years to Susan (who didn’t complete an audio interview), experienced a slight drop in relationship satisfaction between T1 and T2 from initially high levels (7.6 to 7.2). But this does not reflect that he found the programme unhelpful, instead he says “it was useful to have discussions and actually sit and talk about our relationship and I think it made us focus on that, which, quite possibly, we haven’t done in the past”.

Charlie went on to describe how “we both now recognise how important it is to talk about our relationship and we will continue to do this in the future”.

Whilst the vast majority of participants described their novel conversations as being useful, one couple ( $n=2$ ), Aya and Cai, reported having arguments as a result of their discussions and they were looking forward to having the Relate counsellor to help them improve this. However, both Aya and Cai still considered the programme to be valuable.

*5.2.2.1.2. Waiting for counselling.* Eight Relate participants mention the second level-3 theme within the ‘structure and framework’ theme, which represents over half of the Relate participants who completed audio interviews. These participants articulated how it was really helpful to have the structure and focus of the programme whilst they were waiting for their first counselling session, as this can be a difficult time. Daniel (partner of Carol) captures the essence of this theme, as follows:

“I think it was an interesting opportunity because we were quite disappointed when we found out that we’d have to wait quite a long time for proper counselling, and I think it was an opportunity for us to start discussing some issues in a more oriented and focused way.” (Daniel/Relate)

This theme was mainly mentioned by male participants ( $n=5$ ), seemingly because it helped them feel productive and empowered. Arjan describes that “while you’re waiting for counselling it is useful to look at these things”. Another participant, Les, highlighted just how painful it was to face the fact that his relationship was in crisis and how the programme provided him and his partner Kirstie with a framework to feel they were doing something positive whilst waiting for their first counselling appointment:

“I found it quite upsetting that our relationship has got that bad.... I felt that I was doing something. Rather than just accepting the situation, I was actively doing something to help improve matters.” (Les/Relate)

Same-sex couple Freddie and Aiden have been living together for 16 years and participated whilst waiting for counselling. They are both white males with moderate relationship satisfaction scores. Whilst Freddie's mean score dropped slightly between T1 and T2 (from 4.6 to 4), Aiden's mean relationship satisfaction score increased nominally (from 4.8 to 5). However, despite his drop in score, Freddie felt that the programme had been very helpful to them as "normally we only talk about our relationship when we're upset or having a row rather than the sort of conversations we had because of the videos". Freddie went on to clarify how waiting for counselling provided a chance "to talk directly with each other rather than having somebody else in the room as well. It was kind of complementary, in that way, to the counselling sessions." Aiden also described how the REV "helped provide a framework whilst we're waiting for counselling".

Whilst not always mentioned explicitly, there appears to be an implicit acknowledgement by Relate couples that the choice to participate in the research was to provide a framework to work on their relationship whilst waiting for their first appointment (see Section 4.3.2). Whilst the majority of Relate participants found the structure and framework of the REV helpful whilst waiting for counselling, there were three (Cai, Aya and Carol) who seemed to engage slightly less actively as a result of knowing that they were waiting for external help from a therapist. It should also be noted that very high conflict couples displaying evidence of domestic abuse or violence (DVA) during the initial Relate assessment were not invited to participate in the present study based on risks of counselling in couples where DVA is present (Cavanaugh & Gelles, 2005; Tomsich et al., 2015). Therefore, the present study has not evaluated how the REV might be helpful for this group.

*5.2.2.1.3. Weekly ritual.* Almost half the participants ( $n=15$ ) described how they valued the weekly ritual within the programme structure. Most of these ( $n=13$ ) also liked that the programme was very simple and clear, as articulated by Sally: "I really liked the simple framework of the programme and the clarity of it." Sally (61) and her partner John (61) have been together for 11 years although they don't live together. They both experienced notable increases in their relationship satisfaction as a result of completing the programme (Sally from 5.8 to 7.2 and John from 5.6 to 6.6). John described how he had done quite a bit of previous therapy, so he "wasn't nervous", although did not have particularly high expectations of the

programme. But John described the programme as “terribly easy” and “very comfortable” and that watching the videos weekly became an “enjoyable ritual”.

Charlene also described how it was “nice to know that every week we were going to sit down and think about our relationship and I really enjoyed the conversations that we had”. The structure of the weekly email containing the video link seems to have served as a useful reminder for individuals ( $n=11$ ) and may have contributed to the high levels of adherence. Barbara (partner of Harry) described how:

“I found myself really looking forward to the weekly video arriving and felt really sad when it was over. I wish we could have a video like this every week, I really liked them – they were so simple and clear.” (Barbara/AF)

Caroline (41) and Ahmed (41) are a mixed race heterosexual married couple on the Relate waiting list who jointly recorded their interview. Caroline described how they “hadn’t really known what to expect from the videos” and Ahmed described initially being “a little sceptical”. But Ahmed commented that he really liked “the simplicity of receiving the video weekly” and that “the structure was just very clear and easy to follow”. Caroline described how the programme “got us to actually put some time aside to talk and communicate each week with each other”. Ahmed also felt that “the videos were very informative and got us talking more about our relationship, which was a very positive step”.

*5.2.2.1.4. Enjoyable experience.* A notable theme identified in the qualitative analysis was that quite a few participants ( $n=10$ ) from both the Relate and AF samples described really enjoying their experience of the programme. John felt that the programme was “interesting and I enjoyed it”, and his partner Sally described initially feeling “really quite excited about it” and at the end of her interview she concluded that “I’m going to keep going back to them [the videos]. We really enjoyed it; it’s been so enlightening.” Another couple, Brandon (27) and Amy (26), have been living together for two years. Brandon described how participating in the programme “was fun and we felt close and enjoyed it” and this was very much linked to the format. Brandon went on to describe how the programme framework had allowed him and Amy to:

“Dive into new topics and ways of thinking, often over dinner.... it was a nice way to kind of think ahead and say, okay, how would we change things if we could? And what kind of relationship do we want to have? And what’s our vision? And so on. So that was fun.” (Brandon/AF)

Perhaps because of the previously discussed uncertainty about what the programme entailed, Irene described feeling somewhat surprised as she “didn’t realise we were going to have to do exercises and talk about it for as long as we needed after each of the videos, but I actually really enjoyed it. Yeah, I enjoyed listening to you talk and then [Ernie] and I, we got a lot out of talking to each other about what you’d said and then setting ourselves some objectives for the week. So, to sum up, it actually exceeded my expectations.”

*5.2.2.1.5. Online / Flexible and easy.* As well as enjoying the programme, there was also some specific endorsement of the flexible delivery from participants ( $n=13$ ). Of these, five participants specifically mentioned liking that they could do the programme at home, which endorses the online delivery. Irene specifically praised how “the online format was really easy and we could do it at home, it didn’t involve having to go anywhere”. Barbara also felt that the online format was “less threatening” than the idea of in-person counselling.

Three Relate participants described initially having concerns about talking without a therapist present, but all reflected with hindsight on how the online format had been beneficial whilst they were waiting for counselling. Aiden described how he and partner Freddie had previously attended face-to-face counselling and had “just assumed that was the best method”. However, on reflection he described how:

“I did have some reservations at the beginning about using an online method, but.... it was a good technique to really keep us thinking about the on-going issues in that interim period.” (Aiden/Relate)

Whilst these three Relate participants valued the online format, they still felt they needed the additional support of an in-person therapist, and therefore the

REV was seen as a valuable supplement to, rather than substitution for, couple therapy. Overall, whilst only just over a third of participants specifically commented on the value of flexible or online delivery, the lack of criticism and general endorsement of the programme suggests that this aspect was even more widely valued.

**5.2.2.2. *Shared focus.*** The second sub-theme identified within the overarching theme of ‘structure, framework and focus’ was that the videos provided individuals ( $n=23$ ) with a ‘shared focus’. The videos provided a common reference point that helped individuals reflect as a couple rather than reacting to each other. This links to the process of unified detachment in IBCT (Doss et al., 2013). The following quotes from Simon (husband of Lucy), Peter (husband of Mandy) and Daniel (husband of Carol) encapsulate the essence of the ‘shared focus’ theme:

“It made it easier to talk about things in a civil way .... It gave us a reference point in terms of thinking about things.”  
(Simon/Relate)

“The video is external to us. So, you can, kind of, refer to it and talk about it.... but it’s not part of us and not one of us has brought it, not one of us owns the video or the advice. The advice has come from someone else, and that’s helpful.”  
(Peter/AF)

“We were always looking forward to receiving the links to the videos and it made us have a shared goal and we were both looking forward to it and to discussing it .... I think the discussions we were having weren’t very well oriented and we were losing ourselves in some of those discussions. It was much better to have a proper focus and it was good to be able to do it together as a couple.” (Daniel/Relate)

There are four level-3 sub-themes within the theme of ‘shared focus’: ‘facilitates feelings of alignment and closeness’ ( $n=18$ ), reduces blame and

defensiveness ( $n=10$ ), increases self-reflection ( $n=7$ ) and ‘examples and metaphors’ ( $n=26$ ).

*5.2.2.2.1. Facilitates alignment and closeness.* The first level-3 sub-theme within the broader theme of ‘shared focus’ is that the videos helped create a feeling of alignment and closeness between partners. In total this theme was mentioned by 18 participants across both the Relate and AF samples. Participants described how focusing on the videos allowed them to have more discussions that helped them align and feel close, rather than polarise. Simon (33) and Lucy (35) are a white heterosexual couple who have been married for 14 years and were waiting for Relate counselling. Both Simon and Lucy came into the research with very low relationship satisfaction and, whilst still having relatively low scores at T2, they both experienced notable quantitative and qualitative shifts during the programme (Simon’s T1 score of 1 increased to 2.4 at T2, and Lucy’s improved from 2.8 to 3.8). Simon described how the REV helped him and Lucy to communicate in an aligned and collaborative way. Simon described how:

“It’s given you something to think about, to use as a reference point .... which in day-to-day life I think is quite useful.

...Somehow watching the videos provided a focus that meant we were able to speak together without sparking an argument. It was a lot easier to have a conversation quite calmly and to actually talk about dissecting some stuff you talked about and I think that was really good.”

(Simon/Relate)

Shreya (22) and her husband Arjan (23) are a young Asian couple who have been married for three years who also both expressed how the REV had helped them to feel more aligned. Their relationship satisfaction scores indicated high levels of distress and, whilst these scores increased slightly between T1 and T2, the increases were not particularly notable (Shreya from 2.4 to 2.8 and Arjan from 1.8 to 2.4). However, subjectively, Shreya described how she felt the videos had really helped Arjan to engage with her in conversations about their relationship and to shift them away from blaming each other:

“I had introduced the idea of marriage counselling .... and I found that my husband didn’t really want to do that at all. And that meant that our conversations got quite tricky .... The videos really helped him think about what was actually happening in our relationship and what we needed .... it is very much a joint thing about our relationship and what we are doing rather than, sort of, anybody feeling particular guilt or blame.” (Shreya/Relate)

Arjan echoed his wife’s view that the videos made it easier for him to reflect on the relationship because they acted as a “neutral third party”. Arjan makes the point that they already knew the things being discussed in the videos and this echoes the suggestion by Rogge et al. (2013) that most individuals already have the skills required to improve their relationship, but need awareness and motivation to deploy them more routinely:

“These were things that both my partner and I innately knew, but it was good to hear it from someone else, it helps both partners to see the guidance that’s being offered. The points being made were helpful because it helped us align on those and it helped us articulate that in a common language of a common framework.” (Arjan/Relate)

Some participants ( $n=12$ ) felt that the process of watching and discussing the videos together increased their feelings of closeness and we-ness. The term ‘we-ness’ was not used by participants, but is used in the literature (Skerrett, 2003; Skerrett, 2004) to capture a feeling of togetherness. Charlene described how the programme “helped us feel more cohesive as a couple because we know more about what each other thinks about things that we didn’t know before”.

Whilst some participants mentioned the increased sense of togetherness explicitly, for most it was more implicit in the way they talked about the experience of participating. Brandon described how “it was actually a cosy experience to sit down and watch the relationship videos, talk together and then discuss it”. Brandon’s partner Amy described how they often watch TV together as a couple, but that this felt different because “we had the laptop on our laps and were listening

to it sitting next to each other, which felt quite intimate. It was nice, you know, to hear him laugh and to know that we were going to be talking about it later.” Amy went on to describe how:

“This was much better than I expected, it has really made a difference to how we think and feel as a couple, we feel much closer and stronger.... we are listening more carefully to each other and giving our attention when the other is talking.” (Amy/AF)

Amy and Brandon had reasonably high levels of relationship satisfaction at baseline and despite feeling that the programme had brought them closer and helped them to feel stronger as a couple, their actual scores reduced slightly between T1 and T2 (Brandon from 8 to 7.8; Amy from 7.2 to 6.8). This may suggest that relationship education registers differently on relationship satisfaction measures in highly satisfied couples, as couples become more realistic about their relationship and discuss previously avoided topics, as suggested in Dindia and Timmerman (2003).

It is interesting to note that some partners felt closer to their partner even though the content of their conversations felt challenging. Kirstie (partner of Les) described how “I wouldn’t say we looked forward to it, because we knew that we were going to be challenged, but it was something that brought us together”. Les also described how the programme “helped us feel closer as a couple” and that “it was actually very helpful to have a common point of reference and perhaps to have the conversation quickly afterwards when things were fresh in our minds”.

The theme of facilitating alignment was just one way in which individuals described how the videos helped them feel more satisfied in their relationships. Another part of the process, as previously articulated by Shreya, is that increased alignment helped to reduce patterns of blame and defensiveness in discussions.

*5.2.2.2. Reduces blame and defensiveness.* The second level-3 theme mentioned by just under a third of participants ( $n=10$ ) was that the shared focus on the videos helped to reduce blame and defensiveness in the subsequent couple discussions. John describes how thinking about the relationship as a separate entity was also particularly helpful in this regard:

“It was very mild and I didn’t feel as if I needed to be defensive.... Previously we have really struggled to talk about our little faults without openly blaming each other.”  
(John/AF)

Brandon noted how the programme had helped him and Amy to “use less blaming language” which, in turn, led him to feel the programme “could also be helpful for other couples”. However, Brandon went on to reflect that “I’m not sure if this will always be easy to apply. But in general, talking about the videos helps avoid blame and so helps yourself become aware that you have to put in effort to make this relationship work.” Peter (partner of Mandy) made a link between blame and the fear of making things worse:

“I thought that perhaps there might be situations that came up and there would be a sense in which one of us would be to blame for whatever situation had been outlined and that that wouldn’t be helpful. Well, the actual programme wasn’t like that at all. I think that quite quickly the tone was very gentle, was very helpful.” (Peter/AF)

However, not every couple experienced a reduction in blaming behaviour. One couple, Aya and Cai, described trying to be less blaming in their discussions but Cai noted that “at times it could become a bit of a blame situation between myself and my partner”. Cai felt that having a therapist “to step in the middle and moderate and bring the discussion back into focus” would have helped, with Aya agreeing that “a facilitator at the time would have been better to enable us to speak more openly”. This highlights that, whilst sufficient for many couples, the REV programme in isolation will not be enough to interrupt negative patterns of communication for some.

*5.2.2.2.3. Increases self-reflection.* The qualitative analysis identified some individuals ( $n=7$ ) who reported that as they became less blaming towards their partner, they correspondingly became more reflective about the interactions in their

relationship and also the impact of their own behaviour on the relationship. This was notably the case for Tom, who described:

“I would begin by looking, perhaps as is human nature, for the way in which the other member of the relationship was not achieving as clearly as they could. But that soon led to an element of self-reflection and gave us an opportunity to consider, perhaps, what we could do more of....it creates something outside of you to reflect on.” (Tom/AF)

It is notable that Tom’s language shifts from “I” to “us”, reflecting a shift from polarisation to we-ness. The implicit message here is that the common focus of the programme videos has facilitated a less blaming and more collaborative stance from which the couple can reflect.

Other participants also mention increased self-reflection as a result of the REV, particularly male participants. Aiden described how he is “probably consciously and subconsciously much more aware of what I’m doing and actually, kind of, realising how my behaviour affects my partner”. His partner Freddie described how “I initially felt resistance to participating, but now I’m 100% sold and am recommending them [the videos] to my friends.... it’s really helped me understand that if I don’t cultivate my relationship through my behaviour then it will dry up and die out.” This response is interesting, particularly given that Freddie’s relationship satisfaction score actually dropped rather than increased (4.6 to 4) and may reflect the theme discussed earlier, that things can feel worse before they feel better. David (41), who has been living with his partner James (38; both white males) for nine years described how “it was nice to watch the videos together. I guess it made me reflect on a lot of the things that had gone wrong and helped me think about how we can do things better in the future.”

This theme of self-reflection fits with literature suggesting that relationship self-regulation mediates the effect of relationship education (Halford et al., 2007) and so the capacity to self-reflect on how the relationship is going, along with goal setting and improving behaviour, are all likely to promote long-term maintenance of relationship satisfaction (Halford, 2011). This appears to have been the case for David and James, who both experienced notable increases in their mean relationship satisfaction scores between T1 and T2 (David from 5 to 7.2; James

from 4 to 5.6). David's partner James described how their relationship was quite "fragile" before the programme but that the process of watching the videos felt connecting, as "there were moments when we were watching the videos and we were holding hands, and it was quite nice".

*5.2.2.2.4. Metaphors and examples.* The fourth sub-theme in the broader theme of 'shared focus' is 'metaphors and examples'. Many examples and metaphors are used throughout all three videos, as is fitting within the spirit of ACT (Hayes et al., 2011). This theme was widely mentioned by both male and female participants in both the Relate and AF samples ( $n=26$ ) as having been helpful. In particular, 23-year-old Arjan felt that the metaphors were helpful to describe and illustrate key ideas such as "investing in a relationship that are otherwise a bit abstract". Freddie described how he "really liked the visualisations. The programme had some really good examples to try and get the idea across of what a relationship is." Charlie also felt that the examples and metaphors provided a "way of picturing the relationship that was really memorable".

This appreciation of the visuals, examples and metaphors appears to increase the resonance of the messages conveyed for many participants ( $n=13$ ). Ahmed described how he valued the examples and metaphors for both their power and the way they provoked thought. He specifically references an example cited of two psychiatrists, who behaved as if they loved each other and found this rekindled their feelings, as well as referencing stories such as Cinderella which end when the couple get married – because that's when the fairy tale ends and the real work of relationship begins!

"I liked the case studies and analogies, particularly the story about the two psychiatrists, which was interesting. And I also really found the fairy-tale Cinderella story quite powerful and that got me thinking, and quite thought provoking." (Ahmed/Relate)

The main metaphor / example that participants really liked was the example of Lego® as a way to illustrate the investment and work of building a strong relationship. However, because this had a profound impact in reframing how

individuals thought about relationships, it comprises a theme in its own right and is discussed further in Section 5.2.3.2.

**5.2.3. Theme 3: Reframing me, you and us.** The third overarching theme is entitled ‘reframing me, you and us’ and captures the way in which almost every participant ( $n=30$ ) described some sort paradigm shift in how they thought about their relationship. Brandon captures the essence of this theme when he describes how:

“Mostly it was a bit of a paradigm shift internally that helped to change the way you respond or act, such as seeing the relationship as another entity .... and seeing the problem being not the other person but, again, a separate entity. When you are reminded of this it helps you act differently.”  
(Brandon/AF)

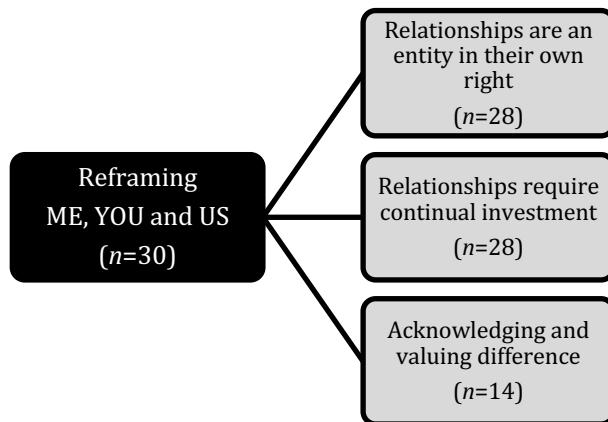
Whilst the majority of participants seemed to convey wholehearted support for the theme of ‘reframing me, you and us’, there were two participants who described feeling initially resistant or negative to this theme, as illustrated by Les:

“I think it’s fair to say that to do things differently requires effort and I was quite conscious of that. But then session two made it very clear – that the point of a relationship is that they do require effort.” (Les/Relate)

Figure 5.4 below shows that within this theme of ‘reframing me, you and us’ are three sub-themes: ‘relationships are an entity in their own right’ ( $n=28$ ), ‘relationships require continual investment’ ( $n=28$ ), and ‘acknowledging and valuing difference’ ( $n=14$ ).

**Figure 5.4**

*Theme 3: Reframing Me, You and Us*



**5.2.3.1. Relationships are an entity in their own right.** The first sub-theme within the overarching theme of ‘reframing me, you and us’ is that ‘relationships are an entity in their own right’ and that it requires committed action to create the type of relationship you want. This theme captures comments by 28 participants and reflects the idea presented in the first video, that relationships are a separate entity, created through the way in which two individuals behave towards each other. This message was conveyed within the broader message of committed action, but it is this message of relationships as an entity in their own right that captured the attention of participants. The essence of this theme is captured by Les (partner of Kirstie) and Cai (partner of Aya) who both describe the experience of thinking about relationships as separate entities as a novel and helpful concept:

“I think the concept that was made very clear in the first episode of ‘you, me and us’ was a good one, and I think that’s something I will remember, in that relationships are created and it’s an entity in its own right. Actually, I think it’s something that we’d very much overlooked.” (Les/Relate)

“This idea that relationships are created, they are an active thing and that’s helped me, kind of, better understand my own relationship with my wife and that, you know, they are not passive you can’t just sit back and allow things to happen.” (Cai/Relate)

Sally and John were the only couple in the qualitative sample who did not live together. Separately they each mentioned that although they had been together for 11 years and loved each other deeply, they often argued over “small differences” and “petty issues”. Both Sally and John described finding the concept of the relationship as an entity in its own right extremely helpful in altering this way of interacting, and this may well explain their aforementioned increase in relationship satisfaction scores:

“The one thing I thought was terrific was the idea of the relationship being almost like a separate entity, a sort of combined project, which I hadn’t thought of in those terms before and I found that really interesting.... One of the great things about having the relationship as a separate entity is that it negates the necessity for blame.” (John/AF)

“The image of the relationship as an entity in its own right, that we are both affected by what we do in it, it was very empowering.” (Sally/AF)

Whilst the theme of ‘relationships as an entity in their own right’ resonated with both male and female participants, the message seems to have resonated particularly strongly with male participants. Charlie described how “picturing the relationship as a third entity .... that will certainly stay with me”. For many participants, this idea of the relationship as a separate entity was considered the most impactful aspect of the programme (as discussed in Section 4.3.6.2). John describes how it has got him thinking about his relationship as “a co-created project” and Brandon describes how the REV helped him see more clearly that his relationship is a “joint effort”.

“Seeing the relationship as its own entity that we build together. And then you are much less likely to blame the other person .... you can make it a joint effort to build this relationship together.” (Brandon/AF)

This theme that relationships are entities in their own right links to the content in the second video about investment, which constitutes the second main theme identified within the broader theme of ‘reframing me, you and us’.

**5.2.3.2. Relationships require continual investment.** The second sub-theme within the broader theme of ‘reframing me, you and us’ is that ‘relationships require continual investment’. This theme is associated with the Lego® brick metaphor that was used in the second video, which conveyed that building relationships is like building with Lego® (in a series of small steps, brick-by-brick, or dismantled similarly). This Lego® metaphor and message about continual investment seems to have resonated strongly, with the theme being mentioned by many of the participants ( $n=28$ ) at some point during their interview as a helpful illustration. Sally (partner to John) and Aiden (partner to Freddie) each explained why they liked this message, as follows:

“I thought the Lego® house was a really excellent image ....

I love this idea of building the relationship and investing in it and of not blaming the other for how we feel, to take responsibility for one’s own feelings and behaviour.”

(Sally/AF)

“Lego® brick on or Lego® brick off, that’s been really useful in terms of actually how we are interacting together and how we are supporting each other and investing in our relationship and investing in each other.” (Aiden/Relate)

The Lego® metaphor seems to have facilitated a shared language for couples that supports the theme of alignment and closeness. Both Ahmed and Caroline described how the Lego® metaphor and concept of investing in relationships really helped them talk together and set shared goals for their relationship. Ahmed felt that he would “remember the Lego® bricks analogy and the.... investing in the relationship analogy”. Caroline described how she “liked thinking about our relationship as an investment and coming up with ways that we can, kind of, improve our investments”. A number of participants ( $n=7$ ) felt that conceptualising

investment as an active, conscious process was really helpful, particularly in the context of how the choices by one partner impact upon the other. This is illustrated with the following quotes from Shreya and Tom:

“Has made us think more consciously around certain aspects of our relationship.... Helped us realise that there are certain areas that we haven’t been investing in and focusing on, where we should have been.” (Shreya/Relate)

“The Lego® brick metaphor really impacted me because it’s made me realise it’s not about doing things because you want to do them, but because you’re conscious of their impact on others .... I think if you kind of force yourself consciously to consider how your actions go towards the Lego® project, I think you perhaps become a better individual.” (Tom/Relate)

As somewhat suggested in the above quotes, one of the features that many participants ( $n=17$ ) specifically found helpful was the way in which the Lego® metaphor helped them understand the impact on their partner, and therefore on the relationship, of *not* doing things. Shreya and Daniel captured the essence of this theme, as follows:

“I thought this [the Lego® bricks metaphor] was a fantastic way of thinking about the challenges and the positives and the negatives that happen during a relationship and how easy it is through our actions and our behaviours to take Lego® bricks so easily off. And how difficult it is sometimes to put them back on. I thought that was a really good analogy when it comes to challenges within relationships.” (Shreya/Relate)

“I think it’s the analogy to the Lego® bricks, the idea that we are constantly putting on bricks and building this relationship with the good experiences and then sometimes in other situations, other experiences might make us take some bricks

off and, in the end, we might destroy what we've built over time.” (Daniel/Relate)

As suggested by a number of the participants quoted above, one of the benefits of the Lego® metaphor and the idea of investment is that it seems to have translated the concept of investment into something that can make a tangible difference to the relationship. Within the context of investment, Harry (partner of Barbara) uses the word ‘deliberately’, which seems to capture a sense of conscious action:

“The impact that it’s had on our relationship has been to make us focus again on the relationship and how we build that and deliberately take actions to strengthen it. Doing things, taking actions that help put the blocks into the relationship, and deliberately doing that.” (Harry/AF)

For a number of the participants ( $n=7$ ) there is some indication that the Lego® metaphor not only helped create a shared language for investing in the relationship, but that this language seems to have conceived investing in the relationship as enjoyable and rewarding, rather than a chore:

“I’ve had a lot more joy doing things for my partner, or doing nice things with him because I was ‘oh like, I’m investing the good stuff right now’. And also, it made me more aware if I was investing something negative and more likely to switch that over to something positive.” (Amy/AF)

“The Lego® bricks idea was the massive impact for me. That was really nice and light-hearted and relatable and was, like, a good, kind of, visual concept, that we both grasped. It was probably the best thing for us so that we could just, without kind of, saying ‘Oh I wish you wouldn’t do that’ you could sometimes say ‘oh you’ve just lost a Lego® brick’ kind of thing.... kept it nice and light rather than making accusations.” (Sarah/Relate)

Whilst there was almost universal praise for the Lego® metaphor, Les felt that “the discussion about Lego® bricks was a little bit toe-curling”. However, he went on to describe how, despite not liking the metaphor, the underlying “concept that you need to continually invest and maintain a relationship is definitely something that will stick with me”.

**5.2.3.3. Acknowledging and valuing difference.** The third sub-theme within the broader category of ‘reframing me, you and us’ is ‘acknowledging and valuing difference’. Fourteen participants mentioned how the videos helped them better understand and work constructively with their differences. Sarah described how “it was interesting to see the contrast in what we felt” and Aya described how “it said to me that we might not agree on everything but we’re very comfortable with accepting our differences and accepting our different approaches and our different ways of thinking. So that was interesting in itself.” Lucy articulated how their discussion had helped her and husband Simon to reflect on just how different they were from each other, but with a new appreciation:

“One of the main things was realising just how different we are in the way we react and think about things, but that we had never really talked about that before. I think that’s why we have so many awful arguments. But it really helped us think about our differences differently and to be more appreciative of each other.” (Lucy)

Freddie also described how he felt more able to value his partner David’s point of view. And this, combined with another message in the second video (externalising problems), helped him and David to better communicate about their differences to find a common solution:

“Understanding that we both have a point of view and to try to understand those thoughts and feelings and what the issues are. But then actually using communication and understanding to look at the problem as the problem and to build a common solution.” (Freddie/Relate)

What is notable about the way in which participants articulate their thoughts about differences is that it seems to have been a positive, helpful process. This is summarised by Freddie who described how “previously we had been thinking that our differences were a real problem and a sign that we shouldn’t be together. We hadn’t really thought that they were normal and that we could work with them.”

## **Chapter 6. Discussion**

### **6.1 Chapter overview**

The present study has been guided by the philosophical lens of pragmatism, with its focus on those issues that have practical, real world value for social change. To this end, the present chapter discusses only those aspects of the results or methodology that most contribute to knowledge in a way that is practical, relevant and has potential to inform social policy. With this in mind, the chapter starts with an overview of the specific knowledge contributions of the present study. The key results with regard to hypotheses and social exchange theory are then discussed. The chapter then turns to discuss the key issue of the REV dose as well as its potential suitability across genders and levels of relationship distress. The chapter concludes by discussing strengths, limitations and practical implications of the study as well as areas for future research.

### **6.2 Overview of research contributions**

This research thesis contributes to the literature on couple relationship education (CRE) by evaluating a low-dose, online relationship education video (REV) programme based on core principles of relationship awareness (RA) that have relevance across a breadth of couple types. The sample of participants reflected the UK population with regard to sexuality and ethnicity (ONS, 2011) as well as representing a broad diversity in terms of participant age, relationship duration and baseline levels of relationship satisfaction. Although responses were collected from heterosexual and same-sex couples, the same-sex couples had to be excluded from the main quantitative analysis (so that gender could be used as the distinguishing feature in the analysis). However, same-sex couples were represented in the qualitative feedback and also in other numerical data. Whilst data was not collected on income, geographical areas were targeted in the recruitment to capture a range from high- to low-affluence populations.

The present study contributes to CRE knowledge in the domains of intervention level (universal application rather than either prevention or treatment), programme focus (relationship awareness rather than skills training), online self-administered CRE, dosage and processes of change. It also contributes to the domain of theory (social exchange theory; Kelley & Thibaut, 1978; Thibaut &

Kelley, 1959) and the investment model of relationships (IMR; Rusbult, 1980a) and to the domain of CRE methodology through its use of mixed methods. It is acknowledged that contributing to knowledge in all of these areas renders the focus of the present study somewhat broad rather than detailed. However, this fits with an early stage feasibility study, where the overarching aim was to evaluate the intervention potential on a breadth of criteria, particularly with regard to feasibility, acceptability and effectiveness.

A major contribution of the present study is to address the need for an easily accessible, brief intervention that couples can engage with in the privacy of their own home. This addresses the ubiquitous problem of relationship distress (both for couples already in distress and those wanting to protect their happy relationship from deterioration). Relationship distress is a widespread and present issue (Marjoribanks & Bradley, 2017; Whisman et al., 2008) that has potentially severe individual, familial and societal ramifications, most pertinently to counselling psychologists in terms of effects on mental health (Menaghan & Lieberman, 1986; Richards et al., 1997), financial stress on women (Leopold, 2018) behavioural issues in children (Cherlin et al., 1991) and increased suicide amongst men (Smith et al., 1988). Many couples could benefit from CRE but are inhibited from engaging in face-to-face interventions by stigma (Clement et al., 2015; Marjoribanks & Bradley, 2017; Skogrand et al., 2010; Vogel & Wade, 2009), lack of awareness (Marjoribanks & Bradley, 2017) and other practical barriers of geography or cost (Halford & Casey, 2010; Nelson & Bui, 2010; Sareen et al., 2007). The REV aimed to address the expressed need in the UK for a universally relevant programme of CRE that can be integrated flexibly with other resources to support couple relationships (Relationships Alliance, 2017). Whilst this need is expressed within the context of the UK, the contribution of the present study, with its emphasis on a brief self-administered intervention, has relevance to warrant dissemination to the broader field of CRE.

In focusing the REV on delivery of RA, the present study addresses the call in the CRE literature for greater knowledge about the role of RA rather than skills training in the delivery of CRE (Bradbury & Lavner, 2012; Snyder & Schneider, 2002). Whilst RA has been found to prevent relationship dissolution in newly-wed and engaged couples (Rogge et al., 2013), and a brief Marriage Checkup RA intervention improved relationship satisfaction in couples at high-risk of relationship distress (Cordova et al., 2014), the present study is the first to examine

whether a single CRE programme focused exclusively on RA can be effective across a broad spectrum of high- to low-satisfaction couples.

In delivering the REV programme online, the present study addresses the call for more online CRE to meet the diverse needs and preferences of couples for online relationship resources (Georgia & Doss, 2013; Marjoribanks & Bradley, 2017; Ponzetti, 2016). Whilst other online CRE programmes are available to couples, such as ePREP and OurRelationship (Braithwaite & Fincham, 2007; Doss et al., 2013), a unique contribution of the present study is its evaluation of an online programme that can be accessed on a smartphone as well as via a computer. Whilst this is not ideal (small screen size), Doss et al. (2016) call for smartphone access in future programmes because the OurRelationship programme restricts access for some couples by only being available via a computer.

The present study contributes to the literature on CRE dosage by exploring whether a low dose CRE can be effective (Doss et al., 2016). Low dose CRE interventions that have been found to be effective are the eight-hour online OurRelationship programme (Doss et al., 2013) and the four-hour face-to-face Marriage Checkup (Cordova et al., 2014). The present study examined what the researcher believes to be one of the lowest doses of CRE, with the total dosage of the REV being under one hour (delivered in three modules each lasting around 15–20 minutes over three weeks). Aiming for a low dose is vital to expand reach by engaging happy, resistant or stressed couples who might not otherwise see the need for a significant investment of their time in a programme of CRE.

The need for cost-effective CRE that can optimise reach is widely called for in the UK (Relationships Alliance, 2017; Van Acker, 2008). This is consistent with the public health strategy outlined by Public Health England (PHE, 2019) and the call for research to expand breadth as well as consider effectiveness (Flay et al., 2005; O'Cathain et al., 2019). The health-economics argument for a programme of CRE that can be delivered to a universal population of couples without the need for trainer / therapist involvement is self-evident and is supported by evidence that trainer support does not amplify the outcome of self-directed CRE when delivered on DVD (Bodenmann et al., 2014). The present study answers the call by Bodenmann et al. to take a self-directed CRE fully online in order to reduce logistical issues (shipping of DVDs, etc.) but also to address concerns that a fully online and self-administered programme of CRE may only be appealing to younger and more technologically-minded couples. The present study therefore contributes

to the CRE literature by establishing that a fully online and self-directed programme is acceptable across a broad range of couple types (age, relationship duration, gender, sexuality, ethnicity, level of distress).

A final contribution of the present study relates to methodology. The study has highlighted the value of integrating both qualitative and quantitative methods in the early stages of CRE development to more fully understand how best to measure effectiveness and better understand processes of change. The study also contributes to the literature on qualitative methods by utilising a novel, self-interview technique that offers potential to expand the reach of qualitative research, both geographically but also with hard-to-reach individuals.

### **6.3 Overview of the research results**

An aim of the present study was to examine feasibility of the REV in terms of adherence. The results demonstrated very high levels of adherence to all elements of the programme. A further aim of the present study was to examine whether targeting commitment level, investment size and emotional intimacy in the REV resulted in predicted increases in each of these measures as well as an overall increase in relationship satisfaction. The surprising finding was that targeting the three processes of commitment (video one), investment (video two) and emotional intimacy (video three) did not result in predicted increases in these three domains of measurement, but did result in a significant overall increase in relationship satisfaction. This suggests that the REV is doing something positive, albeit not as hypothesised. The following sections discuss how integrating the qualitative and quantitative findings helps better understand this unexpected result. The chapter also reflects on the implications of the study findings for social exchange theory (Kelley & Thibaut, 1978; Thibaut & Kelley, 1959) and the IMR (Rusbult, 1980a).

### **6.4 Programme feasibility: adherence**

The recruitment and retention data suggests that the REV is a feasible intervention in terms of engaging couples, particularly given that no financial inducements were paid. High levels of adherence and acceptability were noted for the REV across both males and females, although with notably higher contact coming from women (86%) compared with men (14%). This is consistent with literature finding that men are generally less likely to seek support in maintaining intimate relationships (Cross & Madson, 1997a; Cross & Madson, 1997b; Gabriel

& Gardner, 2004). The very high levels of adherence to the SRA and REV activities and lack of attrition across the study suggests that the act of a couple committing to the programme was key in securing adherence. But the qualitative findings also suggest that weekly emails acted as a valuable reminder that supported adherence. This fits with findings from other self-administered programmes where high adherence was supported by regular contact from professionals (Halford et al., 2004). However, whilst the present study was conducted in the naturalistic setting of participant homes, demand characteristics may also have increased adherence.

## **6.5 Programme acceptability**

The mixed analysis found that all participants described having either a very (77%) or fairly (23%) positive experience of the intervention, with around half describing it as “fun” or “enjoyable”. The qualitative interviews identified that particularly positive features were the videos and how these helped couples to have novel discussions about their relationship. No barriers were identified to the acceptability of the REV based on age, gender, ethnicity, relationship duration, level of distress or sexuality. However, those participants who expressed finding the REV slightly less acceptable in their qualitative interviews tended to be the Relate clients who still felt they needed more intensive counselling support. The mixed analysis on acceptability suggests that the REV has strong potential as a universally relevant and effective entry-point CRE intervention. The integration of both qualitative and numerical data was particularly valuable in gaining a full and nuanced picture of the acceptability of the REV.

## **6.6 Effect of intervention on relationship satisfaction.**

The first step in interpreting the effect size for relationship satisfaction in the present study is to contextualise it within the broader field of CRE research. The highly significant effect size of  $d=0.19$  for relationship satisfaction in the present study is small according to Cohen’s (1988) criteria. It is notably below the average improvement in relationship quality found in a meta-analysis of CRE by Hawkins et al. ( $d=0.36$ ; 2008) and also below the non-significant effect size in an early meta-analysis of self-directed CRE ( $d=0.32$ , ns, McAllister et al., 2012). However, these comparisons can only act as a tentative benchmark, both because of the different study methods and because Hawkins et al. and McAllister et al. based their effect size on the broader category of relationship quality rather than relationship

satisfaction. Nonetheless, the implication is that the REV appears to deliver improved relationship satisfaction at a lower level than the broad range of face-to-face and other self-directed CRE. However, a point to consider when evaluating the improvement in relationship satisfaction is that the preliminary analysis of inter-correlations between the four study variables (Table 4.4) found a high degree of overlap between the measures of relationship satisfaction and of emotional intimacy (.82). This suggests that the two measures broadly capture the same phenomena. In aiming to understand how an improvement was observed on the measure of relationship satisfaction but not on emotional intimacy, given this overlap, it may be that the discrete scale factors within the measure of emotional intimacy are less sensitive to change than the overlapping factors. Further research would be required to investigate whether an effect would still have been observed if the two measures of relationship satisfaction and emotional intimacy had been combined.

Whereas the overall within-sample effect size for the REV on relationship satisfaction was relatively trivial according to Cohen (1988;  $d=0.19$ ), this increased to a moderate / high effect according to Cohen's criteria ( $d=0.60$ ) when the seven most satisfied couples (with scores of 6+ on the 0–8 Likert scale) were removed from the analysis. One possible interpretation of these different effect sizes is that the intervention is more effective with distressed than satisfied couples. However, this interpretation is not supported by the qualitative interviews which instead suggest that it reflects how effectiveness is conceived, measured and evaluated. Whilst couples across the spectrum of relationship satisfaction described beneficial effects of the REV in their qualitative interviews, none of the seven most satisfied couples recorded notable increases in relationship satisfaction during the programme. Two reported nominal increases, three remained stable and two reported very slight decreases. By contrast, scores for the more distressed couples generally increased. The difference in effect sizes therefore appears more likely to reflect a ceiling effect in CRE (Halford et al., 2017; Wadsworth & Markman, 2012; Wang et al., 2008). Another possible explanation is drawn from research by Rogge et al. (2013) who found that CRE can have the unintended effect of sensitising satisfied couples to the skills they need to maintain their relationship. Whilst the qualitative findings in the present study do not suggest that this is the case with the REV, this can only be examined through longer-term studies. Thus, the framework for evaluating effectiveness in satisfied couples needs to focus on longer-term follow-up studies to establish whether the REV can protect against relationship

decline, especially given the suggestion that evaluating the effect of an intervention could take up to ten years (Coie et al., 1993).

The issue of non-specific effects may be relevant to understand how the REV has secured an improvement in relationship satisfaction without the predicted increases in commitment level, investment size and emotional intimacy. Halford (2017) has suggested that the non-specific act of committing to CRE may contribute to its overall effect. However, as couples in the present study consented prior to their random group allocation, this issue would have affected all conditions equally. Nevertheless, the lack of attrition in the present study, across conditions, suggests that the process of jointly committing to the programme may have been a non-specific influence on the overall outcome. It should be noted that the significant difference between the SRA, WLC and REV groups on the outcome of relationship satisfaction indicates that some of the increase over time can be attributed to the content of the REV videos rather than exclusively to non-specific factors.

Having said this, improvements in relationship satisfaction could nonetheless be explained from a common factors perspective. Davis et al. (2012) have challenged the idea that improvements are primarily accounted for by differences between unique therapeutic models. Instead, Davis et al. proposed that interventions are effective to the degree to which they act as a vehicle to deliver common factors. Hawkins et al. (2012) first proposed the concept of common factors in CRE when their meta-analysis found similar effect sizes across skills-based curriculum programmes and all other CRE. Christensen (2010) has suggested five common factors associated with couple therapy as follows: helping couples take an objective, contextualised and dyadic perspective on their issues; decreasing emotionally driven, dysfunctional and damaging interpersonal behaviour; increasing emotionally focused but previously avoided private behaviour; increasing constructive communication patterns; and emphasising relationship strengths and reinforcing gains. The qualitative themes in the present study noted all these five processes in response to the REV. Almost all participants experienced a reframed perspective on their relationship. The shared focus on the videos facilitated an aligned, dyadic perspective and discussion about their relationship. For the majority of couples (59%) it was a novel experience to discuss their relationship together. Self-reported behaviour change also recorded a shift to more supportive and less damaging behaviours, with over one in five participants (22%) reporting that the concept of the relationship as an entity in its own right had helped

them to self-reflect on their own behaviour. This capacity for self-reflection links to research suggesting that improving self-reflection can improve long-term maintenance of relationship satisfaction (Halford, 2011) and theoretically links to Bandura's (1977) self-efficacy theory and the concept of equanimity within mindfulness (Desbordes et al., 2015). These findings suggest that a common factors explanation of how the REV improved levels of relationship satisfaction is pertinent. In this context, the role played by the structure, framework and focus of the REV seems to correspond with Davis et al.'s (2012) suggestion that interventions act as vehicles through which common factors can be delivered and that subsequently allow change to occur.

The mixed methods approach has facilitated a more comprehensive understanding of how the programme structure, framework and focus have supported greater improvements in relationship satisfaction outcomes than would have been gained by either method alone. Based on the researcher's own experience as a couple therapist, partners in counselling often try to align the therapist to their own perspective, against their partner, and this process can escalate conflict and non-acceptance between partners in early sessions without the skilled intervention of the therapist. However, the qualitative results suggest that the shared focus on the videos seems to have interrupted this unhelpful process and facilitated dyadic alignment and feelings of closeness akin to the concept of we-ness proposed by Skerrett (2003, 2004). This may also explain why other low-intensity interventions such as watching romantic movies have also been found to improve relationship satisfaction (Rogge et al., 2013). This contrasts with the approach taken by Doss et al. (2016) in their online OurRelationship programme that nonetheless has highly notable improvements in relationship quality ( $d=0.69$  compared with WLC). Doss et al. decided not to incorporate shared discussions into their programme design in case it escalated non-acceptance between partners. However, the present findings suggest that the process of unified detachment in a self-directed programme is achieved through the shared dyadic focus on the videos, although the notably lower overall effect size versus the OurRelationship programme is acknowledged.

Another important issue when evaluating the improved relationship satisfaction in the present study is that whilst the effect size may appear more modest than with some other online programmes such as the OurRelationship programme (Doss et al., 2016), there was no trainer / psychologist / coach contact in the REV programme. Whilst there were a small number of individuals (from the

Relate group) who felt that a third party would have been useful, for the majority of couples it seems that not having a trainer was beneficial and it also helped them talk together. This makes scaling up the programme more viable with the REV than with other more labour-intensive programmes, thereby providing greater potential for extensive reach, a key issue alongside effectiveness when evaluating the merits of public health initiatives (Flay et al., 2005; O’Cathain et al., 2019). From a health-economics perspective, additional reach may well ameliorate a small effect size, especially if the REV can act as a gateway to more intensive relationship support where needed.

Despite being given only a light emphasis, behaviour change appears to have naturally followed from the videos. Behaviour change was reported by 93% of participants following the first video, although this reduced following each subsequent video to 70% following the third video. However, this may reflect a lack of clarity in the data recorded. A distinction was not made following the second and third videos as to whether behaviour changes were on-going after the first video or were new and different behaviour changes. Therefore, a participant could have recorded behaviour change following the first video that continued throughout the programme but was not recorded after the second and third video. Conversely, a participant could have recorded the same behaviour change (such as talking more) after all three videos. Again, reflecting the value of the mixed methods in the present study, the content analysis of the qualitative interviews provided clarity on how behaviour acted as a process of change. It was left up to couples to make the changes they felt would be useful, and the main changes appear to have been to talk more (72%), to reduce behaviours that negatively impact partner (52%), to seek out ways to be supportive to partner (50%), to listen more attentively (50%) and to use less blaming language (34%). What is interesting about this feedback is that many of these changes reflect behaviours that would typically be taught in skills-based CRE programmes, and yet no emphasis was placed on skills training in the REV. The emphasis in the REV programme on *why* rather than *how* to change behaviour seems to have facilitated some of the behaviour changes needed to improve relationship satisfaction. This result provides strong support for the suggestion by Rogge et al. (2013) that most couples already have these skills but just need the motivation to deploy them consistently in their romantic relationships. This further endorses the suggestion by Whisman and Snyder (1997) as well as Bradbury and Lavner (2012) that CRE should focus on increasing awareness of relationship

processes rather than teaching skills such as communication and problem solving. However, that is not to say that some couples won't still benefit from skills training.

## 6.7 Commitment level

An aim of the present study was to examine the value of specifically targeting the process of commitment with the REV, with the associated prediction that this would result in greater increases in commitment levels in the REV group versus the SRA or WLC groups. However, the surprising finding was that the significant increase in relationship satisfaction does not appear to be associated with a corresponding increase in commitment level. Commitment was measured in the quantitative arm of the present study using the nine-point Likert scale from the IMR (Rusbult et al., 1998). One explanation for the lack of change is that participant commitment levels were already very high (pre-treatment mean score for the total sample was 7.17 on a 0–8 Likert scale). The high baseline levels of commitment provided little scope for improvement and may, therefore, reflect previously discussed ceiling effects. Another possible explanation for the high baseline commitment could be related to a social desirability bias when collecting self-report data (Lorenz et al., 2007), where partners may not want to be seen as uncommitted.

The qualitative findings suggest that another interpretation is that the IMR commitment scale did not accurately capture the way in which commitment was conveyed in the first video, nor how the REV participants experienced it. The IMR commitment scale was shaped by Rusbult et al.'s (1998, p. 359) definition of commitment as "the intention to persist in a relationship" and is informed by the interdependence model of social exchange theory (Kelley & Thibaut, 1978; Thibaut & Kelley, 1959). All seven items (see Table 3.4) in the commitment level scale reflect what Owen et al. (2011) refer to as *dedication* commitment (long-term view of the relationship). Markman and Stanley also describe another dimension of commitment as *constraint* commitment (losses that would be experienced by ending the relationship), although this is more closely captured in Rusbult et al.'s measure of investment size, discussed below. By contrast to Rusbult et al.'s *intentional* definition of commitment, the emphasis in the first video was on promoting commitment from an ACT perspective, as a behavioural expression of personal values. The ACT-informed definition of committed *action* denotes "particular acts in particular moments" (Hayes et al., 2011, p. 328). This more active conceptualisation of commitment in the first and second videos also reflects

Solomon's (1994) ideas that committed love is an *active process* (a verb) rather than an emotion, a symbolic event (such as getting engaged, moving in together or getting married) or a state of being dedicated to something (a noun).

The qualitative interviews indicate that the first video and its focus on committed action actuated a perceptual change towards a more behavioural dimension of commitment not captured in the IMR commitment scale (Rusbult et al., 1998). Prior to integrating the qualitative and quantitative results, the researcher had hypothesised that any increase in committed action would have been captured in a measure of dedication commitment, but perhaps ceiling effects have limited this potential. However, the present results suggest that the behavioural dimension of commitment should be considered as a separate construct from dedication and constraint commitment. Future research could develop a scale that is more appropriate for the behavioural focus in committed action. Committed action remains a relatively under-studied process in ACT, although the Engaged Living Scale (ELS; Trompetter et al., 2013) is an attempt to capture some elements of committed action and process-based living. However, the learning from the present study is that measurement tools need to accurately capture the specific process of change being targeted. The ELS does not focus on committed action and values within a dyadic relationship context and so future research should examine more closely the role of committed action as a process of change in CRE and develop more appropriate measures to better capture the impact of interventions targeting this domain of commitment. The findings relating to commitment provide clear endorsement that mixing quantitative and qualitative methods has provided a richer evaluation of the REV intervention in this domain than would have been the case with either method in isolation.

## 6.8 Investment size

As with commitment level, the present study did not result in the predicted improvement in investment size amongst the REV group using the nine-point Likert scale from the IMR (Rusbult et al., 1998). The mean score for the sample as a whole on investment size was 5.69 on the nine-point scale (ranging from 0–8) so was slightly lower than for commitment (7.17) but was higher than baseline levels of relationship satisfaction (4.90). Thus, ceiling effects are unlikely to provide the full explanation for the lack of increase in investment size following participation in the REV, although 6:20 REV couples had T1 investment size scores of 6+.

Integrating the qualitative results to understand the lack of change in investment size after completing the REV elucidates that something has changed regarding participants' perceptual understanding and behavioural enactment of investment in their relationship, but this is not captured on the IMR scale of investment size. Thus, rather than concluding that the REV has had no effect on investment size, it is more likely that the five-item Likert measure of investment size (Rusbult et al., 1998) did not capture the ways in which investment changed as a result of participating in the REV, as seen with the measure of commitment level. Rusbult et al.'s definition of investment size refers to "the magnitude and importance of the resources that are attached to a relationship—resources that would decline in value if the relationship were to end" (p. 359). The model proposes two types of investment, intrinsic and extrinsic. Intrinsic investments are the efforts and possessions that individual partners input into the relationship (such as money, time, possessions) whereas extrinsic investments are the things that are brought into a partner's life through the relationship (children, friendships, shared memories). It was predicted that by encouraging participants to think about investing in their relationship as an active, engaged process (akin to committed action) they would experience an increase in intrinsic investment that would be captured in the IMR measure of investment size. However, this has not materialised and yet the qualitative interviews clearly capture that participants (88%) experienced a perceptual shift with regard to investing in their relationships as an active, on-going process. The findings from the present study raise important questions for future research about how relationships are measured and evaluated and the need to have more accurate measurements for evaluating change.

Having access to the qualitative interviews has provided an insight into the processes of commitment and investment, as conveyed in the first and second videos, and how these videos impacted couples in terms of perceptual and behavioural change. It seems reasonable to conclude that these perceptual and behavioural changes underpin the improvements registered in terms of relationship satisfaction. It is notable that the process of perceptual change seems to occur as individuals make comparisons with how things used to be in their present relationship and notice how their behaviour towards their partner has lapsed or changed. This finding leads to consideration of social exchange theory.

## **6.10 Social exchange theory**

The findings with regard to commitment and investment using measures from the IMR (Rusbult et al., 1998) suggest two main ways in which the present study contributes to social exchange theory. With a certain degree of irony, the main contribution seems to be with regard to quality of alternatives, which was not considered as a focus of the present study. Social exchange theory (Kelley & Thibaut, 1978; Thibaut & Kelley, 1959) suggests two comparison levels, one being with an individual's past relationships and the other being with perceived alternative relationships. However, this study found that couples make comparisons with a time earlier in their *present* relationship. When considering the messages of investment and commitment, individuals would reflect on where their behaviour and mind-set had become complacent by comparison to a time earlier in the relationship (when they used to talk more, do more things together, make more effort with their appearance, engage in more thoughtful or supportive gestures). This seemed particularly notable when couples were weighing up the risks and rewards of committing to the research, with their main point of reference being previous experiences in the present relationship.

Whilst an examination of social exchange theory was not the focus of the present study, the conclusion based on these findings is that an additional category of comparison level should be considered in social exchange theory that reflects comparison level within current relationship (CL<sub>crt</sub>). This would address a current limitation of social exchange theory where it does not address within-couple variations over time. It would also address the critique by Goodfriend and Agnew (2008) that social exchange theory does not capture future and planned investments, and also relates to literature suggesting that couples cope with a lack of present rewards in their relationship by making comparisons with how they hope things will improve in the future (Baker et al., 2017; Story & Bradbury, 2004).

## **6.10 Emotional intimacy**

An aim of the present study was to examine the value of specifically targeting the process of emotional intimacy with the REV and this informed the focus of the third video and the emphasis on shared activities and vulnerable self-disclosure. Low emotional intimacy is associated with low levels of relationship satisfaction and high levels of relationship dissolution (Kingsbury & Minda, 1988; Waring, 1988) and this was considered an important target for change. The message

of the third video was based on the interpersonal process model of intimacy (Reis & Patrick, 1996; Reis & Shaver, 1988) and findings that emotionally vulnerable self and partner disclosure should increase feelings of emotional intimacy and closeness (Khalifian & Barry, 2020; Laurenceau et al., 1998; Roberts & Greenberg, 2002). However, whilst it was hypothesised that targeting emotional intimacy in this way would result in improved emotional intimacy in the REV group compared with the SRA and WLC groups, this hypothesis was not supported. Whilst ceiling effects are less likely to have been relevant here, with the mean pre-treatment score on the emotional intimacy scale (EIS) for the total sample being 3.83 (based on a 1–5 Likert scale; Sinclair & Dowdy, 2005), there are nevertheless 8:20 REV couples with T1 emotional intimacy scores of 4+ where there is limited opportunity for a significant increase following the REV.

Whilst the quantitative measures suggest there had been no change in emotional intimacy, the qualitative findings discussed above convey an increased feeling of togetherness, or what Skerrett (2003, 2004) refers to as we-ness. However, it seems less unlikely that poor scale accounts for the lack of improvement in emotional intimacy. Whilst the EIS (Sinclair & Dowdy, 2005) was not developed specifically with romantic relationships in mind, it was nevertheless designed to capture emotional intimacy between two people based on feelings of closeness and attachment availability. It was selected for the present study because the five items (see Table 3.4) capture the aspects of emotional intimacy specifically targeted in the third REV video. In considering the difference between the quantitative and qualitative findings on emotional intimacy, it may be that whilst the qualitative findings capture increased feelings of togetherness and closeness in around a third of participants, this may be insufficient to yield a significant difference on the quantitative measures.

### **6.11 Low dosage**

One of the most exciting findings from the present study is that a very low dose of CRE appears to have potential to improve relationship satisfaction, with a small effect ( $d=0.19$ ) across the whole sample of relationship satisfaction and moderate to high effect for the less happy couples ( $d=0.60$ ). However, it is acknowledged that these effects are immediate and further long-term studies are needed to evaluate how and whether they can be maintained. The REV was

delivered in less than one hour of CRE, which compares with eight hours in the OurRelationship programme (Doss et al., 2013) and four hours for the Marriage Checkup (Cordova et al., 2014). Whilst Hawkins et al. (2008) included studies as short as one hour in their meta-analysis, this is the first evaluation of such a low dose online programme. Most couples were generally happy with the number and length of the videos, although some couples would have preferred more (possibly shorter) videos, whilst others felt that three was enough. Demonstrating an improvement in relationship satisfaction from such a low dose is really encouraging and highlights the considerable potential for the REV amongst couples who would not otherwise invest much of their time in relationship support activities.

## **6.12 Sex and gender issues relevant to the REV**

No notable or significant differences in effectiveness, acceptability or feasibility were observed between males and females. The only notable differences based on gender were that males were less likely to make initial contact to participate and that male participants appear to need a secondary justification for participating (a more altruistic rationale). Linking this to other findings in the qualitative interviews, this may help to ameliorate a sense of personal failure about participating in CRE. This fits with other literature which finds that the need for relationship support services is perceived as an admission of defeat or an acknowledgement that the couple have failed to sort out their problems themselves (Chang & Barrett, 2009; Walker et al., 2010), with this stigma being felt most strongly by men (Clement et al., 2015; Skogrand et al., 2010; Vogel et al., 2006). This finding suggests that future recruitment aimed at men should incorporate additional justifications and validation to support male participation.

## **6.13 Unexpected potential of the REV**

One of the encouraging and indirect findings of the present study is that the high acceptability of the REV (even amongst distressed couples and where couples had uncomfortable discussions) may help to reduce the stigma and attitudinal barriers to accessing relationship resources. The researcher received unprompted follow-up contact from partners in >11% of couples ( $n=8$ ) following completion of the study asking if they could share the programme with friends. Notably, over half this contact was from men, and some participants mentioned having up to four or five couples who were interested in the programme based on hearing their

experiences. This suggests that the REV has exciting potential to act as a non-threatening gateway into relationship support and, if integrated into a broader network of resources, the REV could facilitate earlier access to face-to-face therapy for couples in need of more intensive support. Evidence for this possibility comes from couples who found that their attitudes were positively changed towards couple therapy as a result of the positive experience they had participating in Marriage Care's pre-marriage CRE (Spielhofer et al., 2014).

Another piece of encouraging but indirect feedback from the study came from some of the Relate counsellors who saw couples following their participation in the REV. Their anecdotal feedback suggests that participating in the programme may improve the efficiency of subsequent couple therapy by reducing the number of sessions required. There was also feedback that couples who had participated in the REV were more engaged in counselling from the outset. Given that couple therapy is expensive and time-consuming (both factors acting as deterrents to couples; Christensen, 2012), this is something that warrants further research from a health-economics perspective.

#### **6.14 Strengths of the present study**

A strength of the research design was that it enabled the impact of the programme format (couples watching and discussing three short videos at weekly intervals) to be evaluated separately from the specific content of the videos. By including a condition whereby couples watched and discussed three nature videos (the SRA group) as well as a control condition (the WLC group), the present study has been able to differentiate the process of watching and discussing a video from how the content of the REV videos influenced outcome and experience.

Another notable strength of the present study was its mixed methods design. The qualitative interviews have provided a really valuable complement and expansion to the quantitative data, providing a richer and more nuanced understanding of the way in which the REV was experienced across the diverse spectrum of couples in the sample. By triangulating methods, the mixed approach in the present study has examined issues from both qualitative and quantitative perspectives and this has highlighted important issues in terms of measuring the effects of CRE.

A further strength of the present study was the role of self-recorded qualitative interviews. Participants were highly compliant with this method and

engaged well with the process. The quality and quantity of the interviews were surprisingly rich and these findings challenge the notion that research is only truly qualitative when interviews are conducted by a researcher. Whilst it goes without saying that there is more scope with an interviewer present to clarify, explore and follow up issues that arise during the interview, a strength of the self-recorded method is that it avoids some of the inherent biases that result from the positioning of the researcher in the research process (Frost, 2016; Norris, 1997). In the present study the self-recorded method provided a way to lessen the social desirability bias that would almost certainly have occurred if the researcher had conducted face-to-face interviews about her own intervention (in conflict with her role as presenter). This is not to imply that there is no researcher bias in the self-recorded method, but there was something quite pure about the self-recorded feedback as it was recorded without any prompting or direction from the researcher other than through the questions in the semi-structured interview. The self-recorded method was developed by the researcher in her previous market research career to facilitate interviews with participants where there was restricted scope for in-person interviewing. The method was originally developed to interview participants who needed a voice for their experiences but where stigma, geography or cultural / language barriers prohibited standard methods of qualitative interviewing. In many years of using this self-recorded qualitative method, the researcher has found it to consistently deliver valuable, meaningful and reliable information that is often more candid than might be the case where participants are being interviewed in person.

## **6.15 Limitations of the present study and avenues for future research**

A limitation in drawing conclusions on the potential of the REV to generate broad-based change is that a significant improvement was observed only in one of the four dependent variables (relationship satisfaction) but not in the other three (commitment level, investment size or emotional intimacy). However, the qualitative results found that participants experienced a cognitive shift with regard to commitment, investment and emotional intimacy, but this shift is not captured in the experimental study. It is possible that relationship satisfaction is a more sensitive construct to change than investment, commitment and emotional intimacy, but to clarify this would require further examination and longer-term follow up.

Another issue of relevance here is that whilst there were no statistically significant baseline differences in relationship satisfaction between the three conditions (REV, WLC and SRA), there were nonetheless non-significant but notable differences between the three groups at baseline, as shown in Figure 4.1 (the same can also be seen for investment size and emotional intimacy). The role of ceiling effects has already been discussed, and it may be that the notably higher baseline level of relationship satisfaction in the SRA group (5.53) compared with the REV group (4.51) means there was less scope for movement amongst SRA participants compared with participants in the REV condition. Thus ceiling effects may explain some or all of the significant difference observed between these two conditions. However, baseline relationship satisfaction in the WLC group (4.81) is much more closely aligned to the REV condition and thus the significant difference between these two groups cannot so easily be explained by ceiling effects. This suggests that the REV group is more reliably conveying a significant improvement in relationship satisfaction compared to no intervention at all, than when compared with the control intervention (the SRA group). Further research with a larger sample size should ensure that the randomisation process eliminates these baseline differences and would thereby provide a more reliable comparison of the three conditions.

Other limitations are in relation to the study materials. As a middle-aged, middle-class white British woman, the REV presenter acknowledges how this positioning has not captured different responses that might have occurred had the presenter been of a different race, age, sexuality or gender. That said, there were no notable expressions within the research of participants feeling alienated as a result

of the presenter typology. But future research will need to consider how different presenters can best fit the supplementary and topic-specific modules. Another limitation is that the video lengths for the SRA and REV groups were not as closely matched as would have been ideal. This was largely a consequence of previously described practical considerations (see Section 3.4.2). However, future studies should aim for the closest possible match, although it is not considered likely that video length had a major influence on outcome measures.

There are also a number of limitations with the study design. Firstly, the study relies on self-report data, which may carry an associated social desirability bias, as discussed above. Self-reported evaluations in CRE have been validated as measures of their underlying constructs, but are criticised for their failure to identify underlying mechanisms and processes of change. This criticism was addressed to some extent by the inclusion of qualitative interviews, but future research needs to develop insights from the present study into more objective and measurable processes of change so that their relative contribution can be evaluated and the most potent processes targeted to optimise outcomes.

Whilst the present study indicates that the REV programme was broadly acceptable across all the couples interviewed, future research needs to examine the generalisability of these findings. Further research is required to specifically examine whether the REV is feasible, acceptable and effective with under-served and marginalised couples, same-sex couples and couples in the margins between satisfaction and distress who have the potential to really benefit from an intervention to prevent further deterioration. It is likely that disadvantaged / low-income families and moderately distressed couples are particularly hard to engage in CRE because of the perceived risks of participating. Further research could examine whether a soft intervention such as the REV could increase uptake amongst this group.

The present study was also limited by the recruitment method, where Relate counsellors and individuals involved in recruiting the AF sample will probably have focused on recruiting couples most likely to be interested in the research topic. It is therefore likely that less interested or engaged couples are under-represented in the present study. Future research should therefore explore the potential of the REV amongst couples less amenable to CRE. Couples with high levels of conflict were also excluded from the present study and future research could examine whether

the REV could be adapted to help these couples by reducing rather than escalating risk.

A further limitation is that the present study has only evaluated the immediate impact of the REV intervention compared with the WLC and SRA groups. Future research needs to examine the impact of the REV over time to draw any conclusions about its true value in supporting relationships. Existing longitudinal research finds that the 30–60% of couples engaging in interventions (including couple therapy) decline back to pre-treatment levels at some point post-treatment (Roesler, 2020). A number of participants in the present study commended the weekly REV email that contained the video link as a helpful reminder and suggested that an improvement would be on-going reminders, activities and support. Future research could examine the merits of engaging couples in supplementary interventions and reminders to see how this improves the stability and maintenance of effect.

A limitation of the REV for under-served populations is the requirement to have a smartphone or some device with internet access (Doss et al., 2016). Whilst figures for this are high in the UK, with 96% of UK households having internet access (ONS, 2020) and 91.7% having a computer, Watts (2020) highlights the stark digital divide, with over 5.3 million people in the UK still not having any access to the internet. It is likely that this situation is even starker in the USA where only 82% of households have internet access (Ryan & Lewis, 2017). Counselling psychology places a strong emphasis on social justice and so future research should investigate creative ways to connect these couples to CRE. In their strategy document for 2020–25, Public Health England (PHE, 2019) cite their aim as being to reduce growing inequalities associated with social disadvantage. Whilst PHE suggest that technology can be utilised to this end, to truly address this issue and not further marginalise couples who lack access to technology, future research and funding should consider how the REV could be provided to the most disadvantaged couples, perhaps utilising a device-loan scheme. The REV programme could be pre-loaded onto a non-streaming device so that couples could watch the videos and then return the device when completed (the non-streaming element reducing any broader value of the device and making its return more likely).

## **6.16 Practical implications**

The core practical implication of the present study is that the REV seems to have encouraging and exciting potential to act as the much-needed foundation programme of CRE in the UK. Whilst the feedback from this initial feasibility study supports its potential as a low-dose, broadly relevant programme of CRE, it is also clear that many couples and individuals will both want and/or require additional and supplementary resources. It therefore seems essential that the REV is integrated into a broader framework of relationship resources, both online modules and more intensive contact with a trainer, coach or therapist. Halford's (2017) study found that this type of flexible approach was beneficial to couples and future research and collaboration with the Relationships Alliance in the UK will need to consider the best format, structure and content for this. In addition, and drawing on social exchange theory (Kelley & Thibaut, 1978; Thibaut & Kelley, 1959), future development of the programme could consider ways in which partners can experience a sense of on-going reward and value from maintaining their committed action in the relationship. Finally, the REV programme will probably benefit from having on-going reminders (to maintain effect) and possibly supplementary workbooks and more striking animations and visual prompts in the videos (which were very basic).

## **6.17 Conclusions**

The high levels of adherence and positive response to the REV suggest that it is a highly feasible and acceptable intervention that could have universal benefit across a spectrum of relationship distress levels (from happy to highly distressed couples) and different types of couple. There is evidence that the REV is effective both in terms of qualitative and quantitative evaluations ( $d=0.19\text{--}0.60$ ) but that effect size is influenced by level of relationship distress. Whilst the outcome measures in the present study suggest that the REV only has effect in moderately or severely distressed couples, the qualitative interviews tell a different story. Whereas questions have been raised in previous research that CRE may have an unintended effect of diminishing relationship satisfaction in highly satisfied couples, the present study suggests that the REV has benefits across the satisfaction spectrum. Perhaps this is because the focus on relationship awareness rather than skills training avoids disrupting existing mechanisms that support relationship satisfaction. However, this cannot be fully established without further long-term

studies. What is clear is that the REV by no means provides all the resources necessary to restore highly distressed relationships to clinically recovered levels. What it does appear to do is to provide an entry-level / foundation intervention that has potential for universal application. The highly positive reaction to the REV amongst both distressed and happy couples is a good indicator that couples may feel more inclined to engage in further support, either as on-going maintenance (satisfied couples) or to address specific or more challenging difficulties in the relationship (distressed couples). Finally, the mixed methods approach in the present study has provided a far richer understanding of the feasibility, acceptability and effectiveness of the REV than either quantitative or qualitative methods would have provided in isolation.

## **Chapter 7. Reflexivity**

In this section I switch to writing in the first person to emphasise my personal experience of conducting this research study. As a start point I acknowledge how my position, as a white, heteronormative British woman from a relatively privileged background, has influenced all stages of the research process. To retain focus on my role in the research process and in line with good practice criteria outlined by Nowell et al. (2017), I kept a reflexive journal to document and bracket my thoughts, feelings, hopes and expectations, particularly where results were disappointing or confusing in terms of outcomes. This chapter draws on entries from that journal.

One of the main ways in which I have shaped this research is through its dyadic focus on couple relationships. This is not a typical focus for counselling psychologists, whose training focuses predominantly on working with individuals. My interest in relationships was shaped by my own journey of managing and negotiating relationships. I grew up in a family where both my parents stayed happily married until my father, a soldier, died 18 years ago. The instability I experienced due to the peripatetic life of an army family (regularly changing schools, homes and countries) was ameliorated by the stability and love between my parents. The stability provided by my parents' marriage throughout these tumultuous early years has resulted in me passionately advocating the value of strong, healthy relationships. And yet it wasn't enough to protect me from my own divorce which left me both confused and disorientated.

Much soul-searching in the aftermath led me to reflect on the structured framework of the British class system and societal roles and expectations around gender in the 1950s that allowed my parents not to have to question or negotiate their relationship too closely. By the time I married, in 1992, these structures were being eroded and my ex-husband and I had to negotiate our respective roles and responsibilities in a new post-modern era. I was evolving as a feisty feminist who worked hard and earned well, but was conflicted by the gendered roles I had grown up with and would often project onto my ex-husband. We struggled to negotiate the demands of children and the conflicts of different careers. Eventually we divorced after ten years, but have continued as respectful co-parents to our two wonderful boys. The experience of my divorce unleashed an awareness of how much support modern couples need to manage their relationships in light of often confusing,

conflicted and unstructured messages about love, romance and relationships in a post-modern world. It was this interest that led me to complete an MA in relationship therapy with Relate in 2010.

The three relationship videos that are the focus of this present study encapsulate much of what my ex-husband and I needed to hear in 1995, when our marriage was starting to struggle. The messages are a compassionate and non-judgemental response to the unhelpful couple therapy that we experienced, that only served to amplify blame and polarisation. But the videos also address the vacuum of resources that we experienced when we were starting to struggle. Therefore, I fully acknowledge how my own personal experience is at the heart of this study. Another researcher would undoubtedly have developed different video content or found an alternative solution to the issue of relationship distress.

My subsequent academic journey on this DPsychotherapy programme has helped me focus and formulate the content of these videos beyond their common-sense, experiential origins. They are now grounded in theory and research. An important reflection for me over the period of this DPsychotherapy programme has been my own development as a researcher. After a 20-year-long career in market research I was initially blind-sided by the academic research process. My early journal entries capture a frustration at the slow pace associated with academic research and the multiple hurdles that had to be navigated. But I have come to value academic rigour in a way that I could not have anticipated. However, my abiding view is that market research also has a lot to offer to academic research, particularly with regard to qualitative and innovative approaches.

As a market researcher, my position was valued for its impartiality. However, by contrast, my role in the present study was far from impartial given the duality of my role as both presenter and researcher of the REV. Throughout this research process I have sought to maintain a pragmatic stance of subjectivity on my own reflections in order to facilitate objectivity in my data collection, analysis and interpretation, as advocated by Shannon-Baker (2016). The selection of a mixed methods research (MMR) design, with the inclusion of a quantitative experimental component along with the self-recorded qualitative interviews, was for me a way in which I could increase objectivity in the data and reduce potential bias. Whilst I was not able to put aside my hope that the intervention would be useful to couples, I endeavoured to implement guidance from Fischer (2009) and to bracket these hopes and expectations throughout all stages of the research. Reflecting on this

now, I can see how my previous career as a market researcher helped me with this bracketing process.

Another way in which my own positioning has shaped the present study is in terms of the recruitment samples. My own clinical involvement with Relate (the relationship charity) meant that I selected them rather than other members of the Relationships Alliance to support the recruitment. I acknowledge that political issues influenced the research through the involvement of Relate with the recruitment. In the spirit of pragmatism, these issues were discussed and clear boundaries were put in place to protect participants from any personal or organisational motivations for the research and to clearly delineate the research process from any organisational aspirations. There was also my influence on the AF sample profile. Whilst I sought colleagues and friends to help with recruitment who represented breadth and diversity, they were all nonetheless aligned to me through some connection of class, background, education, geography, profession, ethnicity, sexuality, age or other characteristic. Therefore, whilst the final sample was nationally representative with regard to ethnicity and sexuality, I acknowledge my own positioning in the present study.

There were many times during the qualitative analysis where I felt a connection with participant experiences. In particular I resonated with the women who emailed during the recruitment phase, longing to participate, but unable to persuade their male partners to engage. To counter-balance this, one of the most uplifting moments for me was when I really grasped how much the males in the sample had enjoyed and valued the programme, particularly the men who emailed, after the study was completed, asking to share the videos with friends.

My personality compelled me to push myself beyond the required limits for a DPsych. The consequence of this is that I have grown and developed through the process of completing this research study in more ways than can be described within this chapter. But particularly notable is that I have developed a level of comfort with statistics (something I never imagined that I could achieve). My clinical skills felt reasonably strong before I started the programme, but I reflect on how they have developed and how my confidence as a therapist has grown over the past three years. Overall, I am hopeful that my ambitious project may have slightly advanced the field of relationship education. That makes me feel incredibly proud, albeit a little exhausted.

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# **APPENDICES FOR PORTFOLIO**

## **PART A: DOCTORAL RESEARCH**

- A: REV intervention
- B: Screening instructions (Relate couples)
- C: Instructions for recruiters (AF couples)
- D: Invitation letter (AF couples)
- E: Participant information sheet
- F: Participant consent form
- G: Explicit consent form
- H: *A-priori* power calculation
- I: *Post-hoc* power calculation
- J: Self-report form
- K: Qualitative interview guide
- L: Ethics applications
- M: Debrief
- N: Grid of transcription segment (acceptability content analysis)
- O: Box plots

## **PART B: CLIENT CASE STUDY AND PROCESS REPORT**

- P: Thank you card

## **PART C: PUBLISHABLE JOURNAL ARTICLE**

- Q: Author guidelines for Family Relations journal

# PART A: DOCTORAL RESEARCH

## Appendix A: The REV intervention

### MODULE ONE: COMMITMENT TO CREATING HEALTHY RELATIONSHIPS

1. Purpose of this programme is to get you thinking about relationships.
  - Watch together (shared experience)
  - Talk together (to practice communication, listening)
  - Do something with the ideas (applying it)
2. Relationships don't just happen; they're CREATED and require commitment and engagement:
  - Through the process of interacting
  - Created in the space between us
  - We can create relationships that are good / bad / unhappy
3. Therefore.... Relationships are entities in their own right:
  - Separate from the people in them
  - But created by them
  - ME – YOU - US
4. Whilst they're an entity, they aren't static, they're a process. Changeable.
  - *Often people want to find 'a relationship'* without thinking what type?!
  - Finding 'someone' vs being committed to building a relationship
  - Definition: Relationships are *the way in which we are connected*
  - This can be the result of a small blip (an occasional row or fall out)
5. Relationships are created through our committed actions
  - So, it's not about finding 'the one' its finding 'someone with good relationship skills, habits and commitment'
  - But often we let these skills slip over time
  - Dating versus 5 years in: Bad habits versus good habits?
  - Relate behaviourism couple story: Psychiatrists (they behaved as if they loved each other until they fell back in love)
6. Fairy stories have a lot to answer for: The alternative Cinderella Story
  - Expectations often leave us feeling dissatisfied with what we've got
  - Worked hard to get to know each other
  - So took time to really listen and understand each other
  - They treated each other as equals and with respect
  - They recognized the challenges of sharing a life when they were very different people
  - But learned how to accept and celebrate their differences
  - They chose never to try and 'win' at the others' expense
  - Or to humiliate or put each other down
  - And made a point of making time for romance, sex and talking
  - They had fun together

- And THAT is why they lived *Happily Ever After*
7. **Key questions:** What kind of relationship do you want to create?
- What kind of relationship do you want to create? (vision Statement)
  - How are you going to create this? (values and behaviours you are willing to commit to)
8. **Homework exercise:** Value / Mission statement
1. Work together to create a value statement for the relationship
  2. And your own personal values for how you want to behave in this relationship
  3. Discuss and identify alterations you would be willing to make to bring the relationship closer in line with this vision and these values
9. **Behavioural Implementation:** Identify specific changes you would like to make based on the ideas you have discussed today and commit to making these changes for the next week to see if they change the way the relationship feels.

## MODULE TWO: INVESTING IN RELATIONSHIP

1. Start with encouragement (these things are hard)
2. Summary of last module:
  - Relationships are created / require commitment
  - Entity in their own right
  - Me – You – US
  - Through our behavior / committed action
  - A process
  - Valued direction / vision statement
3. This module: Investing in relationships:
  - Often think of this in a financial sense: not what I mean
  - Invest in many ways: invest our time, energy, resources, thinking
  - Invest in many areas: hobbies, work, children, friends, family, fun etc.
  - *But do you think actively about investing in your relationship?*
  - Partly cultural?
  - Partly what has been modelled for us?
  - But often because other areas of our life are more demanding of us
  - And relationships are often less demanding
  - Often it is our partner who seems demanding. But it's the relationship
  - Simon & Sally example (blame) (often not a lot of time)
  - Often invest by acknowledging the relationship
  - Is this an idea that you've thought about?
  - Could it be useful to you?
  - Could there be a link between how much we invest in our relationship and how rewarding they are?

#### 4. Ways of investing in the relationship

- Not necessarily big gestures, it's often the small every day ways that you show your partner that you're thinking about them
- The choice to regularly spend good quality time together
- The choice to have fun and laugh together
- The choice to be interested in what your partner is saying and experiencing
- The choice to create new memories and new experiences together
- The choice to give each other small gifts, cards, tokens
- The choice to say something uplifting or encouraging
- The choice to talk things through with your partner when you feel hurt, upset or disappointed so that we can work it through
- The choice to do this by taking responsibility for your own thoughts, feelings and vulnerabilities rather than blaming our partner
- The choice to try and see things from our partner's point of view
- The choice to listen really attentively to what our partner is saying without interrupting, blaming or defending ourselves
- The choice to be compassionate about our partner's struggles
- The choice to apologise when we know we've done something thoughtless or hurtful
- We are investing through our choices and decisions
- When we choose not to do something we are choosing not to invest in the relationship

#### 5. Lego® Brick House: Metaphor

Lego® brick on: thoughtful phone call, kiss before bed, comment of appreciation, a trip out of our way to do something just because we can, listening compassionately, understanding without judgement, saying sorry, being willing to forgive

Lego® brick off: harsh word, name-calling, eye rolling, defensiveness, withdrawing affection, blaming, storming off, forgotten birthday

- If we're not building something strong and building it up we never get the relationship off the ground
- Put in place good investment habits that strengthen the relationship (Cambridge breakfast couple)
- The important question here is to:
  - Slow things down
  - Think about the impact of our choices or lack of choices on the relationship

#### 6. Creating good investment habits

People often say to me that it is hard to avoid doing things 'I just can't help myself'. But I would invite you to think about that and to ask yourself *If I was paid a million pounds to stop doing this or to start doing this could I do it?* If the answer is yes then it is a choice.....

Habits are hard to break, good and bad. But it takes three days of really conscious effort to break an initial habit and a month of practice to bed it in..... So, there are lots that you can be doing straight away and it will get easier as you start to reap the rewards and feel the relationship changing.

## **7. Homework:**

- Discuss your thoughts about the ideas in this module
- Identify which ideas you feel can be most helpful to your relationship and why?
- Identify specific ways in which you can apply these ideas to your relationship both in the short and long term?

## **8. Behavioural Implementation:**

- Make a specific plan and commitment about ways in which you can increase your investment to the relationship over the next week:
- Both at a personal level (things you can do to invest or stop doing that take a Lego® brick off)
- And as a couple (rituals, things to do together)

## **MODULE THREE: EMOTIONAL INTIMACY**

1. Summary of last modules: Entity in their own right
  - Me – You – US
  - Relationships are created through our committed behavior
  - Relationships are a process, not a ‘thing’
  - Vision statement and values (what you’re creating and how you’re going to create it)
  - That relationships are something we need to invest in (Lego® brick on/off)
2. Varying experiences of these first two modules: Managing difference is what relationships is all about. Go back to module one: Vision statement
4. Creating EMOTIONAL INTIMACY through COMMUNICATION
  - Brené Brown
  - Most couples who come for counselling struggle with communication
  - They don’t understand why their partner doesn’t respond
  - Or doesn’t do things in the way that they know would be supportive
5. The main problem is the *way* we communicate – it creates distance and polarization instead of closeness, connection and intimacy.
6. Need to be able to see things from both points of view = it’s a relationship after all
  - Our survival instinct gets in the way (friend / foe) (fight, flight, freeze response)
7. But if we try to WIN arguments then we are needing our partner to be wrong & what kind of relationship does that create?
  - It gets in the way of understanding each other?
  - The whole point of relationships is that you are trying to build a relationship that works for you both
  - Therefore, one person can’t be ‘right’ about how to do things and the other ‘wrong’ (no line by line veto)

- Instead it's about listening to each other's thoughts and feelings without judging them
  - And allowing yourself to be shaped by what they think and feel
  - And working together to solve problem
8. In relationships people aren't problems, problems are problems
9. Relationships can't thrive if the individuals in that relationship aren't getting what they need and value to thrive.
9. Often poor communication gets in the way - sets off negatively reinforcing patterns
  - Need to communicate our needs (*what I need or value....*) i.e. to feel safe, to feel I matter to you, to feel respected by you
  - Difference between demands and requests (*Would you be willing to? Would you like to?*)
10. Communication in relationships is all about learning about each other so that the relationship works better. RESPECT for differences. CELEBRATE them. *LIKE BUILDING A PIECE OF FLAT PACK FURNITURE!*
11. You will wind each other up, trigger each other, disappoint each other – you are humans. Whenever something goes wrong in the relationship it is an opportunity not to be missed – these are OPPORTUNITIES TO LEARN MORE ABOUT EACH other so that you can make the relationship work better. So always sit down once the dust has settled and work out what went wrong = get to know each other better.
- 12. Homework:** Discuss the content of this video:
  - What resonated with you from the video?
  - What do you think are your strengths as a couple and how could you make more of these strengths? Apply them to other areas of your relationship?
  - Which areas can you identify from this video that might be relevant to work on in order to improve your relationship?
- 13. Behavioural Implementation:**
  - What can you do differently in your relationship as a result of the ideas in this video today?

## **Appendix B: Screening instructions (Relate couples)**

**Note to I.A. Therapist:** *The research should not be introduced to couples if the IA indicates any domestic violence or coercive control.*

Before we close, I'd like to tell you briefly about a research study being conducted by a doctoral student at City University. Would you be interested in hearing a few details so that we can think together about whether this might be an option for you as a couple?" *Do not proceed if either or both partners say they are not interested. If only one partner is interested, explain that it is a criteria for the research that both partners want to participate in order not to accentuate any difficulties within the relationship prior to the start of counselling.*

*If the couple is interested to know more you can tell them (you can use your own words):* The study is evaluating a series of three 15 minute relationship education videos. This is something you would do whilst waiting for your first counselling appointment. Do you think this is something you'd be interested in?

**Note to I.A. therapist:** If you conclude that the couple is not suitable:

- *It sounds like this isn't the right thing for you as a couple at this time.....*
- *Unfortunately, you wouldn't be eligible at this time as a requirement of the study is that both partners want to participate.....*

If the couple seem suitable and are BOTH interested: Hand / post the information pack. All the information about the study is contained in this envelope. The study involves filling in various questionnaires at three specific time points as well as completing a short, confidential recorded interview if you are in the group who watch the videos. Participation is entirely voluntary so please take time to read the information carefully so you can decide if you want to participate. If you would like to participate then you contact the researcher directly and she will follow up from there – her details are in this envelope.

## **Appendix C: Instructions for recruiters (AF sample)**



### **Instructions for helping with recruitment**

Thank you so much for agreeing to help recruit couples for my sample.

You can invite any couples who you feel might be willing or interested to participate once they know what the study involves (in that sense it should be fairly self-selecting).

There are no exclusions based on ethnicity, gender, sexuality, relationship status or duration or age of participant.

The only basis for not inviting a particular couple would be if you have prior knowledge that they are a very high conflict couple (i.e. ongoing court orders, injunctions etc).

There are two stages for inviting them:

- a) Initially ask whether they'd be interested in finding out about a research study looking at how to support couple relationships and, if yes then....
- b) Please give or email them the invitation letter and link to the study (and if emailing then use the version that includes a link directly into the study).

Any questions that are not explicitly clear in the invitation letter should be addressed to me.

Priscilla Short  
Principal Researcher  
[REDACTED]

## Appendix D: Invitation letter (AF Participants)



### Research study: A mixed methods study to assess the feasibility of an online relationship education program to support couple relationships

My name is Priscilla Short and I am a Doctoral student in Counselling Psychology at City University, London. I am looking for couples who would be willing to take part in my research. So, firstly, thank you for taking time to consider whether this is something you would be interested in helping me with.

**What's in it for you?** All couples in the study gain access to a new online programme of relationship education designed by the researcher, an experienced relationship counsellor. The programme comprises three videos that can be watched and discussed by couples together in their own time and home. This may be beneficial to you as a couple and also by participating in the research you are contributing to the body of knowledge about how to better support couple relationships. You will also receive a summary copy of the research findings.

#### What is involved?

The study is conducted online in the flexibility of your own home. To ensure the research is meaningful, participants are randomly allocated to one of three groups: the relationship education programme (Group C) a shared activity group (B) or a control group where you do nothing different to normal (A).

**Group A:** These couples only have to complete two short online questionnaires, one at the beginning of the study (Q1) and one three weeks later (Q2). Each partner completes the questionnaires confidentially and individually but sequentially at the same time on the same device. Following completion of Q2, the couple gains access to the relationship education programme which they can either watch in their own time or through ongoing participation in the research study.

**Group B:** These couples also complete Q1 and Q2, as above, but in the three-week period between these two time points the couple together watch and discuss three short (5 minute) nature videos at approximately weekly intervals. Finally, after completing Q2, each partner makes a short, confidential audio recording about their experience of watching and discussing the nature videos together.

**Group C:** These couples also confidentially complete Q1 and Q2, and in the three-week period between these two time points the couple watch and discuss the three 15-minute relationship education videos at approximately weekly intervals. Finally, after completing Q2 each partner makes a short, confidential audio recording about their experience of the programme.

All couples in control groups A and B gain access to the relationship education programme immediately upon completion of the three-week research period. To qualify, both partners in the couple need to participate (i.e. it is a joint activity) and should contact [Priscilla.short.1@city.ac.uk](mailto:Priscilla.short.1@city.ac.uk) for more detailed participant information and for information on how to consent if you would like to be involved having read this more detailed information.

## Appendix E: Participant information sheet



### PARTICIPANT INFORMATION SHEET

**Principle Investigator:** Priscilla Short (supervised by Dr. Trudi Edginton).

**Research Project Title:** A mixed methods study to assess the feasibility of an online relationship education program to support couple relationships

#### **The purpose of this information sheet:**

You are being invited to take part in a research project being carried out by a Counselling Psychology Doctoral student at City University. Before deciding whether to participate, it is important you understand why the research is being done and what it will involve. Please take time to read the following information carefully and discuss it with others if you wish.

#### **What is the purpose of the study?**

The purpose is to evaluate whether a brief Relationship Education Programme (REP) can positively benefit couples. The REP comprises three video modules to be viewed over a three-week period at intervals of one every 7 days. Having watched each video together, couples will discuss the content and then endeavour to apply what they have learned to their own relationship.

Participating couples will be randomly allocated into one of three groups, as follows:

- A. Control group: doing nothing different from usual
- B. Watching and discussing three short (5 minute) nature videos together over two weeks.
- C. Watching and discussing three short (15 minute) REP videos together over two weeks.

All three groups are vitally important in order to generate meaningful data. Group A enables us to compare any impact of the REP (Group C) with couples doing nothing different from normal. Group B enables us to compare any impact of the REP (Group C) with couples watching and discussing three non-REP videos together so we can see if it is simply the activity of watching and discussing three videos that accounts for any impact. So, groups A and B act as 'controls' to evaluate the specific contribution, if any, made by the REP on relationship satisfaction over the two week period.

#### **But will I miss out if I'm allocated to Groups A or B?**

It is important that group allocation should not disadvantage participants allocated into Groups A and B, without whom we would not be able to make a meaningful assessment of the REP. So, all participants in Groups A and B will gain access to the REP videos immediately following completion of the three-week research period.

### **Why have I been invited to participate?**

You have been invited because you are in a relationship, aged 18+, live in the UK and are waiting for your first couple therapy appointment with Relate<sup>3</sup>. A total of 64 couples (128 individuals) will participate in the study.

### **Do I have to take part?**

It is entirely your choice to participate. You can withdraw at any time, without giving a reason and without being penalised or disadvantaged in any way. However once data has been anonymised and published it will no longer be possible to withdraw from the study.

### **What will happen to me if I take part?**

You will be involved in this study for two weeks. What you are asked to do depends on whether you are allocated to Group A, B or C and the random allocation cannot be altered or amended. All aspects of the study can be completed in your own home.

1. *GROUPS A, B and C:* You will each be asked to separately and confidentially fill in a questionnaire at two time points and to post these back within 48 hours of receipt in reply-paid envelopes. The questionnaires should take no longer than 5 minutes each to complete. The first time point (T1) will be at the point of enrolment in the study and the second time point (T2) will be two weeks later.

2. *GROUP B only:* In addition to (1) above, Group B watch and discuss together three short (5 minute) nature videos at intervals approximately 4-5 days apart over the two week period between T1 and T2. There is no specific time frame for the discussion, but approximately 15 minutes seems about average. Immediately following completion of the T2 questionnaire, each partner will separately and confidentially make a short audio recording lasting approximately 10-15 minutes of their thoughts and feelings about the activity of watching and discussing the three nature videos together. A short questionnaire will be provided to guide the topics for this audio feedback and this can either be done on a Dictaphone we will post to you or you can upload or email an audio recording made on your own device.

3. *GROUPS A and B only:* As soon as T2 questionnaires (+ audio interviews for Group B) are received back from both partners, you will both receive an email with links to the three REP videos. Watching these does not constitute part of the study and so there is no obligation to watch the videos or to watch them within any particular time frame.

4. *GROUP C only:* In addition to (1) above, Group C watch and discuss together three short (15 minute) REP videos at intervals approximately 4-5 days apart over the two week period between T1 and T2 as well as implementing any ideas that seem helpful from the videos. There is no specific time frame for the discussion, but around 30 minutes seems the average. Immediately following completion of the T2 questionnaire, each partner will be asked to separately and confidentially make a short audio recording lasting approximately 10-15 minutes of their thoughts and feelings about watching and discussing the three REP videos together. This can either

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<sup>3</sup> The alternative wording for the AF participant information sheet reads “*You have been made aware of this study because you are in a relationship, aged 18+ and live in the UK.*

be done on a Dictaphone we post to you or you can upload / email an audio recording made on your own device.

**What happens to the Audio Recordings?**

If you are allocated to Groups B or C you are asked to produce an audio recording of the experience in the activity of watching and discussing the three videos. These audio recordings will only be for the purposes of analysis and written quotes may be used in conferences, publications and presentations for the purposes of illustration. No other use will be made of them without your written permission and no one outside the project will have access to the original recordings.

**What equipment do I need?**

You need an electronic device and internet access in order to watch the videos.

**What if my counselling appointment comes through before the end of the research period?<sup>4</sup>**

If your first counselling appointment with Relate comes through whilst you are still engaged in the two week research period then your counselling should take priority. You are welcome to continue watching the videos (Groups B and C) but please advise the researcher know by email so that your data can be excluded from the study. Please email [REDACTED]

**What are the possible disadvantages and risks of taking part?**

It is not anticipated that there are any disadvantages or risks of taking part in this study although it is possible that it may not make a positive difference to your relationship.

**What are the possible benefits of taking part?**

Without research such as this, we cannot improve the support provided to couples preparing for counselling. The shared activity may have a beneficial effect on your relationship. Additionally, all participants can receive a summary of the research results when they are published in around 9-12 months' time.

**Explicit Consent**

If you agree to participate, you are asked to provide information on gender, age, ethnicity, sexual orientation, relationship status and relationship length and to consent for this information to be anonymously analysed.

**What if there is a problem?**

If you have any problems, concerns or questions about this study, you should ask to speak to the lead researcher. If you remain unhappy and wish to complain formally, you can do this through City's complaints procedure. To complain about the study, you need to phone [REDACTED]. You can then ask to speak to the Secretary to Senate Research Ethics Committee and inform them that the name of the project is: A mixed methods study to evaluate how waiting for couple therapy impacts on relationship satisfaction.

.....  
You could also write to the Secretary at:

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<sup>4</sup> This section was omitted in the participant information sheet for AF participants

[REDACTED]  
Research Integrity Manager  
Research & Enterprise  
City, University of London  
Northampton Square  
London  
EC1V 0HB  
Email: [REDACTED]

City holds insurance policies that apply to this study. If you feel you have been harmed or injured by taking part in this study you may be eligible to claim compensation. This does not affect your legal rights to seek compensation. If you are harmed due to someone's negligence, then you may have grounds for legal action.

**Will my taking part in the study be kept confidential?** All the information that we collect about you during the course of the research will be kept strictly confidential. You will not be identified in any ensuing reports or publications. All data will be identified only by a code, with personal details kept in a locked file or secure computer with access only by the immediate research team.

**What will happen to results of the research study?** The study will probably form the basis of research articles for publication and presentation at conferences. Results are normally presented in terms of groups of individuals. If any individual data are presented this will be totally anonymous, without any means of identifying individuals involved.

**What will happen when the research study stops?** The data from this study will be stored securely for ten years following the end of a research study and then destroyed in accordance with City University's policy and the data protection act (2018).

**Who is organising, reviewing and funding this study?** This study has been approved by City, University of London Research Ethics Committee and is supported by Relate and the principal researcher, Priscilla Short, designed the REP. The research ethics approval number for the study is ETH1819-0055.

**Contact for further information:** If you have any queries about the research you can contact the principal researcher Priscilla Short at [REDACTED] or supervisor Dr. Trudi Edginton: [REDACTED].

**What should I do if I want to take part?** If you would like to take part in this study you need to complete and sign the attached consent form and send it back to the principal researcher as soon as possible given the two-week study period. You can do this by posting your signed forms in the enclosed pre-paid envelope or emailing a scan or photograph of the completed documents to [REDACTED].

**Contact for further information:**

If you have any queries about the study you can contact the principal researcher Priscilla Short on [REDACTED] or supervisor Dr. Trudi Edginton on [REDACTED].

**What happens if I do not want to carry on with the study?** You do not need to consent to the study and even if you do then you have the right to withdraw at any point, without explanation or penalty.

**Data Protection Privacy Notice: What are my rights under the data protection legislation?** City, University of London is the data controller for the personal data collected for this research project. Your personal data will be processed for the purposes outlined in this notice. The legal basis for processing your personal data will be that this research is a task in the public interest, that is City, University of London considers the lawful basis for processing personal data to fall under Article 6(1)(e) of GDPR (public task) as the processing of research participant data is necessary for learning and teaching purposes and all research with human participants by staff and students has to be scrutinised and approved by one of City's Research Ethics Committees.

Further, City considers the processing of special category personal data (pages 3 & 4 of attached consent form) will fall under Article 9(2)(g) of the GDPR as the processing of special category data has to be for the public interest in order to receive research ethics approval and occurs on the basis of law that is, inter alia, proportionate to the aim pursued and protects the rights of data subjects.

The rights you have under the data protection legislation are listed below, but not all of the rights apply to the personal data collected in each research project:

- right to be informed
- right of access
- right of rectification
- right to erasure
- right to restrict processing
- right to object to data processing
- right to data portability
- right to object
- rights in relation to automated decision making and profiling

For more information, please visit [www.city.ac.uk/about/city-information/legal](http://www.city.ac.uk/about/city-information/legal)

**What if I have concerns about how my personal data will be used after I have participated in the research?** In the first instance you should raise any concerns with the research team, but if you are dissatisfied with the response, you may contact the Information Compliance Team at [REDACTED], who will liaise with City's Data Protection Officer [REDACTED] to answer your query. If you are dissatisfied with City's response, you may also complain to the Information Commissioner's Office at [www.ico.org.uk](http://www.ico.org.uk).

Thank you for taking the time to read this information sheet.

## Appendix F: Consent form



### PARTICIPATION CONSENT FORM

#### Title of Study: A mixed methods study to assess the feasibility of an online relationship education program to support couple relationships

Voluntary consent is a vital part of this research so both partners must complete and sign below. Throughout the study you will consistently respond as Partner A or B. To make it easy to remember who is which, please allocate A to the partner whose birthday falls earliest in the year (*i.e. if your birthdays are in March and July, the partner with the March birthday is Partner A and the July birthday is Partner B*)

		<b>Please initial boxes</b>	
		Partner A	Partner B
1.	I confirm that the project has been explained to me and I have read the participant information sheet, which I may keep for my records. I have been given the opportunity to ask questions and any questions have been answered to my satisfaction.	<input type="checkbox"/>	<input type="checkbox"/>
	I understand the research will involve (depending on whether I am allocated to the Group A, B or C):	<input type="checkbox"/>	<input type="checkbox"/>
	1. All participants: Confidentially and separately complete two relationship evaluation questionnaires, one at the start of the study (T1) and the other three to four weeks later (T2). These will be posted to the researcher and must be completed and posted back within two days of receipt (in reply paid envelope provided).	<input type="checkbox"/>	<input type="checkbox"/>
	2. Group B only: Together to watch and discuss three online nature videos at intervals of approximately one week between T1 and T2.	<input type="checkbox"/>	<input type="checkbox"/>
	2. Group C only: Together to watch and discuss three online Relationship Education (REP) videos at intervals of 7 days between T1 and T2.	<input type="checkbox"/>	<input type="checkbox"/>
	3. Group B and C: Immediately following completion of T2 questionnaire to complete and send / upload a recorded audio interview lasting around 10-15 minutes.	<input type="checkbox"/>	<input type="checkbox"/>
2.	This information will be held by City as data controller and processed for the following purpose: Public Task: The legal basis for processing your personal data will be that this research is a task in the public interest, that is City, University of London considers the lawful basis for processing personal data to fall under Article 6(1)(e) of GDPR (public task) as the processing of research participant data is necessary for learning and teaching purposes and all research with human participants by staff and students has to be scrutinised and approved by one of City's Research Ethics Committees.	<input type="checkbox"/>	<input type="checkbox"/>
3.	I confirm that I am consenting of my own free will.	<input type="checkbox"/>	<input type="checkbox"/>

4.	I understand my participation is voluntary, that I can choose not to participate in part or all of the project, and that I can withdraw at any stage without being penalised or disadvantaged in any way.		
5.	<p>I understand that any information I provide is confidential, and that no information that could lead to the identification of any individual will be disclosed in any reports on the project, or to any other party. No identifiable personal data will be published. In addition, I will provide 'special category' data to enhance the analysis of data collected in this study on the 'explicit consent form' (attached) on:</p> <ul style="list-style-type: none"> <li>- Gender</li> <li>- Age</li> <li>- Ethnicity</li> <li>- Sexual orientation</li> <li>- Relationship status</li> <li>- Relationship length</li> </ul> <p>City considers the processing of special category personal data will fall under: Article 9(2)(g) of the GDPR as the processing of special category data has to be for the public interest in order to receive research ethics approval and occurs on the basis of law that is, inter alia, proportionate to the aim pursued and protects the rights of data subjects and also under Article 9(2)(a) of the GDPR as the provision of these personal data is completely voluntary.</p>		
6.	I agree to City recording and processing this information about me. I understand that this information will be used only for the purpose(s) set out in this statement and my consent is conditional on City complying with its duties and obligations under the General Data Protection Regulation (GDPR).		
7.	I agree to the arrangements for data storage, archiving, sharing.		
8.	I agree to the use of anonymised quotes in publication.		
9.	I agree to take part in the above study.		

Name of Participant \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_  
 (Partner A)

Name of Participant \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_  
 (Partner B)

\_\_\_\_ PRISCILLA SHORT \_\_\_\_  
 Name of Researcher \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

*When completed, 1 copy for each participant; 1 copy for researcher file.*

**Note:** This version of the consent form was used in the postal survey. The wording was very slightly amended in line with ETH1819-1610 to reflect consent and participation online via Qualtrics.

**Note:** This version of the consent form was used for the Relate participants. Wording for the AF sample was amended to exclude reference to Relate

## Appendix G: Explicit consent form



### **EXPLICIT CONSENT FOR SPECIAL CATEGORY DATA:**

Under GDPR regulations no information about your identity is shared between Relate and the researcher. To participate in this study, you need to provide your contact details as well as additional information relevant to analysing the study data. In completing the form below you are providing your personal details to the researcher for the purposes of contacting you about the study. Additional information is only used anonymously to analyse the data.

	<b>PARTNER A</b>	<b>PARTNER B</b>
<b>Name:</b>		
<b>Postal Address: (For sending postal questionnaires)</b>		
<b>Mobile:</b>		
<b>Email:</b>		

If the random allocation places you in Group C, please indicate which method you'd prefer for recording and returning your audio feedback.

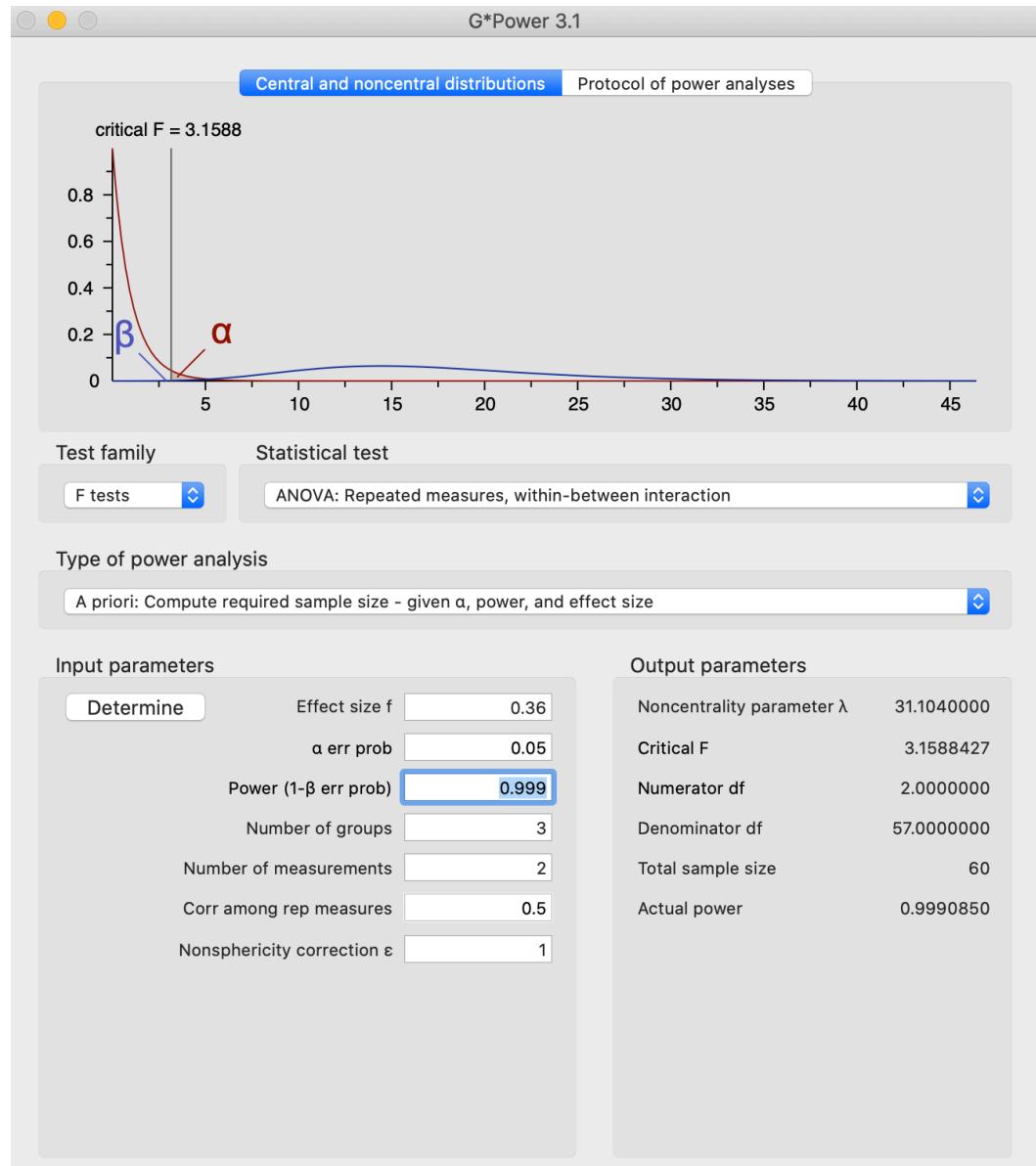
	Partner A choice	Partner B choice
Dictaphone posted to me (and then return in reply paid envelope)		
Record on my own device and upload using an upload link provided		
Record on my own device and email audio file as an attachment		

**For Relate participants:** Finally, do you have a date yet for your first ongoing counselling appointment (as it is important you complete the study before you start your counselling):

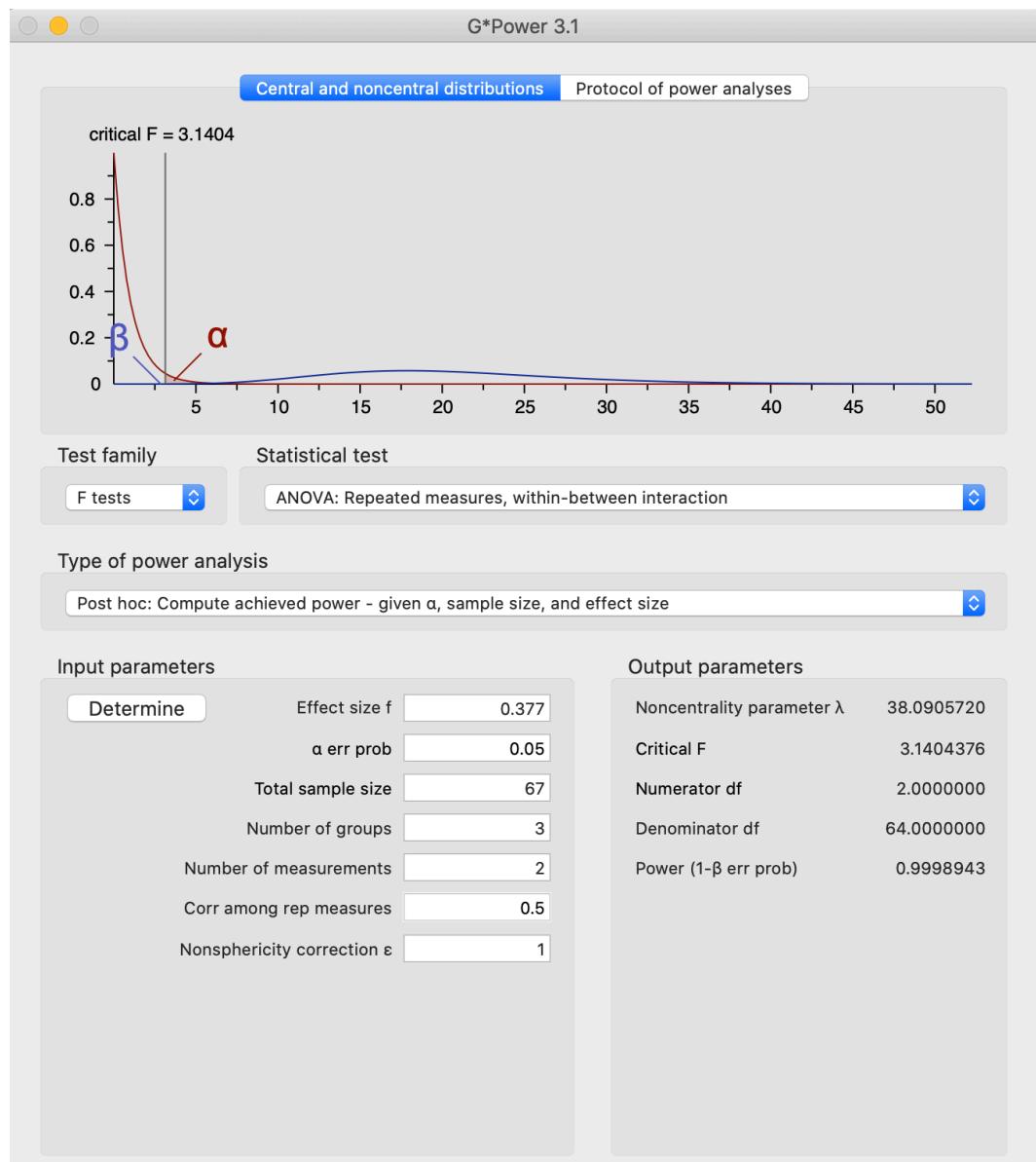
No  Yes  *If yes, please specify date:* \_\_\_\_\_

	<b>PARTNER A</b>	<b>PARTNER B</b>
<b>Which best describes how you think of yourself?</b>	<b>Please tick one</b>	<b>Please tick one</b>
Male		
Female		
Prefer not to say		
In another way (please give details):		
<b>Please indicate age of each partner?</b>	<b>Write in</b>	<b>Write in</b>
Age (in years)		
<b>Which best describes your ethnic group/background?</b>	<b>Please tick one</b>	<b>Please tick one</b>
White		
Asian / Asian British		
Black / African / Caribbean / Black British		
Mixed / Multiple Ethnic Groups		
Other Ethnic Group		
<b>Which best describes how you think of yourself?</b>	<b>Please tick one</b>	<b>Please tick one</b>
Heterosexual		
Gay or Lesbian		
Bisexual		
Prefer not to say / In another way		
<b>Which best describes your relationship status?</b>	<b>Please tick one option</b>	
Married		
In Civil Partnership		
In relationship and living with my partner		
In relationship and not living with my partner		
In another way (please give details):		
<b>Relationship Length:</b>	<b>State in months/years</b>	
How long have you been together?		

## Appendix H: *A priori* sample power calculation



## Appendix I: Post hoc sample power calculation



## Appendix J: Self-report form

Finally, we know people often can't complete all aspects of the relationship education programme, so it is important when interpreting the results to get an accurate understanding of what were actually able to do. ***So please tell us.....***

<b>Which videos did you watch?</b>	<b>Tick to indicate which videos you WATCHED</b> (and indicate if watched together or separately)		
	Watched together	Watched separately	Did not watch
Video one			
Video two			
Video three			

<b>Did you have discussions about the videos?</b>	<b>Tick if you had a DISCUSSION after the video(s)</b> (and indicate approx. discussion length)		
	Tick if you had a discussion about the video	Tick if you did not have a discussion about the video	Approx. length of discussions (in minutes)
After Video one			
After Video two			
After Video three			

<b>Did you try doing things differently after each of the videos?</b>	<b>Tick to indicate if you TRIED DOING ANYTHING DIFFERENTLY after the video(s)</b>	
	Tried doing things differently after the video	Did not try doing things differently after the video
After Video one		
After Video two		
After Video three		

*Note:* The last question was only asked to REV participants

## **Appendix K: Qualitative interview guide**

### **DISCUSSION GUIDE FOR SELF RECORDED AUDIO INTERVIEWS**

*Please say as much as you feel would be helpful – there is no recording limit, so it is really up to you, but around 10-20 minutes is a guideline. Some people can feel self-conscious when they start recording but find this lessens once they get started.*

**Take each question in turn and speak clearly, recording into the Dictaphone. Also, please speak out the question or question number you are answering.**

1. *Please start by describing your overall thoughts and feelings about the programme that you have just completed? Please say as much as you feel would be helpful for us to know?*
2. *How did the actual experience compare to your preconceptions about the programme?*
3. *Please describe your thoughts and feelings about the experience of watching the videos with your partner?*
4. *Please describe your thoughts and feelings about discussing the content of the videos with your partner?*
5. *Please describe your thoughts and feelings about being asked to do something differently as a result of each video module?*
6. *Please describe which aspects of the programme or content you found most helpful and why?*
7. *Please describe which aspects of the programme or content you found unhelpful and why?*
8. *Please describe any ways in which you feel the programme has had an impact or effect on your relationship, either positive or negative?*
9. *In what was do you feel that the content or format of the programme could be improved in any way?*
10. *Finally, what do you think will be the three main things you'll remember from this programme in a year's time*

**Thank you so much for your help.**

You have now finished the interview.

*Please send your completed interview back by whichever means you selected:*

**Dictaphone:** In the enclosed jiffy bag (postage paid)

**Record on your own device & Upload:** Upload audio file using the link provided by email (please email me on [REDACTED] if you haven't received this)

**Record on your own device & Email:** Attach audio file to a password protected email and send it to [REDACTED].

## **Appendix L: Ethics application**

### **Ethics Application (+ amendments & approval letters)**

ETH1819-0055:	Original application (see transcript below)
ETH1819-0922	Amendment (to change quantitative measures)
ETH1819-1610	Amendment (to put survey online with Qualtrics + add in third SRA condition)
ETH1920-0282	Amendment (to incorporate additional AF sample)
ETH2021-0308	Amendment (to use transcribing software)

### **Ethics ETH1819-0055: Priscilla Short (Medium risk): Application**

#### **Risks**

R1) Does the project have funding?

No

R2) Does the project involve human participants?

Yes

R3) Will the researcher be located outside of the UK during the conduct of the research?

No

R4) Will any part of the project be carried out under the auspices of an external organisation, involve collaboration between institutions, or involve data collection at an external organisation?

Yes

R5) Does your project involve access to, or use of, material that could be classified as security sensitive?

No

R6) Does the project involve the use of live animals?

No

R7) Does the project involve the use of animal tissue?

No

R8) Does the project involve accessing obscene materials?

No

R9) Does the project involve access to confidential business data (e.g. commercially sensitive data, trade secrets, minutes of internal meetings)?

No

R10) Does the project involve access to personal data (e.g. personnel or student records) not in the public domain?

No

R11) Does the project involve deviation from standard or routine clinical practice, outside of current guidelines?

Yes

R12) Will the project involve the potential for adverse impact on employment, social or financial standing?

No

R13) Will the project involve the potential for psychological distress, anxiety, humiliation or pain greater than that of normal life for the participant?

No

R15) Will the project involve research into illegal or criminal activity where there is a risk that the researcher will be placed in physical danger or in legal jeopardy?

No

R16) Will the project specifically recruit individuals who may be involved in illegal or criminal activity?

No

R17) Will the project involve engaging individuals who may be involved in terrorism, radicalisation, extremism or violent activity and other activity that falls within the Counter-Terrorism and Security Act (2015)?

No

T1) Principal Applicant

Name

Mrs Priscilla Short

Provide a summary of the researcher's training and experience that is relevant to this research project.

Bio of Priscilla Short

Priscilla Short has an MA in Relationship Therapy (distinction) and is a qualified Relate practitioner. Priscilla has over 2000 clinical hours of experience working with couples, primarily in private practice in London but also as a licensed Relate practitioner in North Norfolk. It is in the course of this work that Priscilla has developed the psycho-educational modules that form the basis of this research, all of which are based on well-established psychological theory and research. The modules draw primarily from the theoretical model of ACT (Acceptance and Commitment Therapy).

The modules have been used in Priscilla's clinical practice and have received sufficiently positive feedback that she wants to research them formally across a broader and more diverse client population.

Priscilla is currently in her second year of the DPsyC Counselling Psychology at City University. In terms of research experience, Priscilla has over 25 years' experience as a researcher in the field of healthcare. At the start of her research career she worked in the market research department of Beecham Ltd (now part of GSK). In 1989 she set up her own research consultancy which she ran for 20 years and was involved in over 600 research projects, both qualitative and quantitative. Priscilla has extensive experience of mixing methods and coming up with innovative approaches to data collection.

T2) Co-Applicant(s) at City

T3) External Co-Applicant(s)

T4) Supervisor(s)

Dr Trudi Edginton

T5) Do any of the investigators have direct personal involvement in the organisations sponsoring or funding the research that may give rise to a possible conflict of interest?

No

T6) Will any of the investigators receive any personal benefits or incentives, including payment above normal salary, from undertaking the research or from the results of the research above those normally associated with scholarly activity?

No

T7) List anyone else involved in the project.

P1) Project title

RELATIONSHIPWISE: A mixed methods study to assess the value and impact of a brief relationship education programme for couples waiting for couple therapy.

P1.1) Short project title

RELATIONSHIP-WISE: A feasibility study

P2) Provide a lay summary of the background and aims of the research, including the research questions (max 400 words).

The researcher has developed a Relationship Education programme known as RelationshipWise for couples. The programme comprises three videos, each of which is

accessed and viewed online. Each video module lasts approx. 15 minutes, followed by guidance on 'homework' to facilitate communication and connection within the relationship. The modules are watched weekly in a fixed order as part of a complete programme.

Relationship Education (CRE) is an evidence-based method of delivering relationship support and is widely used in the USA, Australia, Japan and Germany. However, no such intervention exists in the UK despite calls for this in the UK Relationship Alliance Manifesto (2017). Mostly RE is delivered face to face, but there is increasing research indicating that online RE interventions can increase the reach of RE to a broader and more diverse audience due to lower cost and greater accessibility (Halford & Casey, 2009).

The intervention has been used by couples in the researcher's own clinical practice over the past three years. Subjective feedback from these couples suggests it can positively influence couple relationships and may accentuate the progress of couple therapy. Traditionally RE has been evaluated quantitatively, using measures of relationship satisfaction. Whilst research has established RE as effective, RE programmes do not always generate an increased score for Relationship Satisfaction (Hawkins et al, 2008). This may be that the nature of how RE affects or impacts a relationship may not express itself in terms of improved relationship satisfaction scores (Schramm, Galovan & Goddard, 2017). Indeed, relationship satisfaction scores can even go down as couples learn to face and talk about difficult issues (Dindia & Tinnerman, 2003).

Despite clear gaps in knowledge about how RE facilitates change (Wadsworth & Markman, 2012; Halford, 2011), there is very little qualitative research on RE programmes. However, a mixed methods study by Gambrel & Piercy (2015) suggests that the duality of qualitative and quantitative measures can provide a more comprehensive evaluation of RE programmes than either method in isolation.

This research will therefore assess the RelationshipWise intervention using a mixed methods approach to elicit both subjective and objective evaluation of the assumptions contained within the programme.

#### RESEARCH AIM:

To understand the experience and effectiveness of a short programme of online CRE at improving relationship satisfaction, investment size, commitment level and emotional intimacy in distressed couples and to ascertain whether satisfaction is driven by investment, commitment and emotional intimacy.

#### Quantitative Hypotheses:

Hypothesis 1: T2 levels of relationship satisfaction will be higher for the treatment versus control group after controlling for baseline levels of satisfaction.

Hypothesis 2: T2 levels of investment size will be higher for the treatment versus control group after controlling for baseline levels of investment size.

Hypothesis 3: T2 levels of commitment will be higher for the treatment versus control group after controlling for baseline levels of commitment

Hypothesis 4: T2 levels of emotional intimacy will be higher for the treatment versus control group after controlling for baseline levels of emotional intimacy

Hypothesis 5: T2 levels of: A) investment size, B) commitment, and C) emotional intimacy will be positively related to T2 levels of satisfaction; these relationships will be stronger for those assigned to the treatment versus control group.

Qualitative research question: What are the experiences of couples in the Intervention Programme?

The integrated mixed methods question: To what extent and in what way do the qualitative interviews facilitate a more nuanced and comprehensive understanding of the quantitative data?

P4) Provide a summary and brief explanation of the research design, method, and data analysis.

#### Research Design:

This mixed methods study will measure the quantitative impact of the RelationshipWise programme on relationship satisfaction scores as well as the subjectively experienced impact on couple's relationships. Using a mixed methods approach broadens the scope of Relationship Education evaluation by utilising conventional relationship satisfaction measures alongside more subjective evaluation.

The quantitative component of the study will be an RCT and the qualitative component will be short self-directed qualitative interviews completed by participants on a Dictaphone. This Dictaphone method has been adopted to address the issue that the researcher is also the presenter of the video modules. It is a method developed by the researcher in her previous market research business and has consistently worked well as a qualitative data collection method.

#### Sample size and Structure:

A total of 64 couples will be recruited into the study, 128 participants in total.

32 Couples: The control group: Wait-list control group (treatment as normal)

32 Couples: The intervention group will complete the programme over three weeks whilst on the waiting list, between initial assessment and first counselling appointment.

#### Sampling Procedure

Once recruited, couples will be allocated a participant identifying number (1a and 1b for the first couple, 2a and 2b for the second couple and so on).

Based on their identifying number, couples will be randomly allocated:

Odd numbered participants = Intervention group

Even numbered participants = Control group

Couples will not be able to influence which group they are allocated to, either by request or by asking to switch. If a couple doesn't want to be in the group to which they are allocated then they cannot be accepted to the study and their identifying number will be offered to the next participating couple.

#### Quantitative method:

The impact of the programme will be measured using the standardised CSI-32 (Couple Satisfaction Index-32) questionnaire amongst all participants in both the Control and the Intervention Groups. The CSI-32 measure will be taken at two time points:

T1. After IA (initial assessment), prior to commencing the programme

T2: Four weeks later

All questionnaires will be completed by both partners in the relationship separately, confidentially and privately and will be posted back to the researcher in individual, separate reply paid envelopes.

Format for the Intervention and the Intervention specific research:

- Having completed the T1 questionnaire, couples in the ‘Intervention’ group will receive a link to the first video module to watch and discuss.
- These couples will then complete discussion homework lasting 30-60 minutes as soon as possible after watching the videos
- The above process will be repeated three times at weekly intervals until all three video modules have been watched and discussed.

T2: All participants will complete T2 questionnaire.

Qualitative method:

T2: After completing the T2 questionnaires, couples in the intervention group will then conduct self-directed interviews using a Dictaphone to collect their more nuanced, subjective and personal experiences of the programme. These are conducted confidentially and not with their partner present. Participants will receive a sheet with around 6-8 topics to discuss, recording their answers straight into the Dictaphone. The Dictaphones & interview guide will be sent out in the same pack as the T2 questionnaires but with clear instructions that they should be completed AFTER T2 questionnaires. They will then return the Dictaphone in a reply-paid envelope to the researcher.

Data Collection and Analysis:

The quantitative data will be collected on paper based questionnaires and manually entered into and analysed in SPSS using an ANCOVA to control for baseline measures and also a Linear Regression. It is likely that the data will be analysed several times to see what differences there are by gender as well as by couple.

The qualitative data will be transcribed by the researcher and analysed using thematic analysis. Data will be integrated using a mixed methods coding format and in the discussion section of the report.

## MODULE SUMMARIES

### MODULE ONE: Relationships are created

This module focuses on the following key points:

- Having realistic expectations about relationships (not happy)
- Relationships are something we create
- Relationships are entities in their own right. Me – You - US
- The type of relationship we create will be determined by the way in which we interact
- Values are important in helping us create the type of relationship we want
- The importance of both people having similar values for what they’re trying to create
- Relationships are a journey, not a destination.
- Relationships are not static, fixed entities; they are affected day by day through the way we interact

### HOMEWORK:

- a. Discuss the ideas in the modules
- b. Try to come up with a shared vision statement (value statement) for the relationship

### MODULE TWO: Investing in relationships

- Introduces the idea of consciously investing in relationship
- Everything we do either invests positively or negatively in the relationship
- Metaphor of Lego house: everything we do either puts a lego brick on or lego brick off
- Developing mindfulness about how our behavior is investing in the relationship

**HOMEWORK:**

- a. Discuss the ideas in the module
- b. Identify ways in which you could increase your investment in the relationship.

**MODULE THREE: Intimacy & communication**

- Summary of the first two modules
- This module highlights some of the factors that influence how we relate in our romantic relationships to prepare for the couple therapy
  - o Early attachment relationships
  - o Survival / protective patterns
  - o Managing difference (working for rather than working against the relationship)
  - o Difficulties with emotional regulation (managing our triggering)
  - o Identify the underlying themes that you argue about

**HOMEWORK:**

- a. Discuss the ideas in the module
- b. Try to identify any specific issues that seem to prevent you from having the relationship that you want

P4.1) If relevant, please upload your research protocol.  
 P5) What do you consider are the ethical issues associated with conducting this research and how do you propose to address them?  
 The research will comply with the BPS Ethical Guidelines (BPS 2014; Hewson et al, 2013) as well as MRC guidelines on Intervention Development (Craig, 2006). All participants will read a participant information sheet and give signed consent to participate. Specifically:

- Participants informed on the research content, purpose and audience
- Responses anonymised by removing identifying information
- Participants informed of GDPR and confidentiality of their data
- Details of data storage & disposal
- Their right to withdraw

A specific ethical issue considered in this research study is the lack of control over how participants respond to the videos as they will be watched by participants unsupervised in the privacy of their own homes. To address this issue there will be a process of screening participants for vulnerability for risk and harm, both in terms of risk of suicide or harm as well as of domestic abuse within the relationship. This screening will be done by Relate and will involve a comprehensive face-to-face intake assessment with the couple that will be conducted by a qualified Relate therapist prior to inviting participants to participate in the study. Only participants who are assessed to be of low risk will be invited into the study.

To clarify- participants will not be made aware of the study unless they are considered suitable by the Relate Therapist.

Another ethical issue that has been considered for this research is the possibility that participants may reveal an issue of risk or concern in the process of the research – most likely through their qualitative interview. Depending on the level of concern that is raised, there will be a consultation process with Relate as to whether confidentiality needs to be breached in order to keep the participant safe. More broadly, at both the beginning and end of the research all participants in the intervention group will be provided with a written statement providing them with a range of relevant support organisations (such as The Samaritans, Women's Aid and Mankind Initiative) in the same way as at the end of a TV or Radio Programme on a sensitive topic.

P6) Project start date

15 Apr 2019

P7) Anticipated project end date

26 Jul 2019

P8) Where will the research take place?

All of the research can be conducted in the privacy of the participant's own homes. The videos are viewed online, the quantitative questionnaires are completed online and the qualitative interviews are self-directed using a Dictaphone so can be conducted by the participants in their own homes.

P9) If the research is taking place at a time or in a place that could potentially put the researcher at risk (e.g. research taking place in a participant's home) please provide details of the lone working policy you will be following.

No

P10) Is this application or any part of this research project being submitted to another ethics committee, or has it previously been submitted to an ethics committee?

No

E1) Provide details of the external organisation/institution involved with this project.

Relate (The Relationship Charity)

E2) If applicable, has permission to conduct research in, at or through another institution or organisation been obtained?

Yes

E2.1) Provide details and attach the correspondence.

This is currently in process but Relate have agreed to collaborate with the project. A working group has been set up to manage the research process with the individual Relate centres. This working group comprises:

[REDACTED] (Relate Services Manager Norfolk & Suffolk)

[REDACTED] (Counselling Psychologist & Senior Practice Consultant with Relate SW)

[REDACTED] (Head of Relate Training and Digital Practice Development , Relate)

It has been decided that the research process should be staggered, with one centre (likely to be one of the London centres or Cambridge) initially engaging in the project to get a feel for the number of likely participants and potential uptake. Based on this, additional centres will be engaged. Only Relate centres with a waiting list of between 4-10 weeks will be engaged in the study in order to optimise opportunity to recruit the required sample.

*The options for the following question are one or more of:*

*'Under 18'; 'Adults at risk'; 'Individuals aged 16 and over potentially without the capacity to consent'; 'None of the above'.*

H1) Will persons from any of the following groups be participating in the project?

None of the above

H2) How many participants will be recruited?

128

H3) Explain how the sample size has been determined.

Because the study is mixed methods and it is intended that all participants will complete both components, quantitative and qualitative, the study size needs to balance the two analysis requirements. The sample of 64 couples (128 participants) will be large enough to provide statistical data on any changes pre & post programme and yet also provide a volume of qualitative data that will be manageable rather than overwhelming to analyse.

H4) What is the age group of the participants?

Lower      Upper

18

H5) Please specify inclusion and exclusion criteria.

**INCLUSION CRITERIA:** To participate in this study, participants will need to have the relevant technology to access the videos.

**EXCLUSION CRITERIA:** Prior to being invited to participate in the study, potential participants will have provided two sources of information to help identify their suitability for the research project.

The initial Client Questionnaire (submitted in this ethics application) will screen ensure that only couples attending together to focus on their own relationship issues are included in the research.

Having completed the initial Client Questionnaire, couples will all participate in a 50 minute structured face-to-face assessment conducted by a qualified Relate counsellor. This assessment follows a set format covered in the Relate Initial Assessment (IA) Questionnaire (submitted as part of this ethics application) to determine whether the couple are suitable for and sufficiently safe to participate in relationship counselling. The Client Questionnaire and Initial Assessment are standard Relate procedure for ALL couples. Only couples considered suitable based on these assessments will be invited to participate in the study. Only couples considered suitable and at low risk of domestic abuse will be invited to participate in the study. A final stage of screening (Questionnaire submitted at H10) will provide the Relate IA therapist a final opportunity to assess for conflict and risk prior to offering the participant information pack. Suitable couples will then be handed a participant information pack by the Relate Therapist at the end of their IA. They will be instructed to read the information carefully and email the researcher directly with any questions. Participants interested in participating in the study will complete the consent form and return this directly to the researcher in a freepost envelope.

H6) What are the potential risks and burdens for research participants and how will you minimise them?

The main risk would seem to be that the relationship could deteriorate as a result of talking about the issues affecting their relationship. This has been addressed by minimising any controversial content in the modules and also through the availability of subsequent counselling for all participating couples.

Another burden could be that the 'wait list control' participants may feel disappointed not to have access to the programme. To address this, all three modules will be made available to the control group once they have completed their face-to-face counselling.

H7) Will you specifically recruit pregnant women, women in labour, or women who have had a recent stillbirth or miscarriage (within the last 12 months)?

No

H8) Will you directly recruit any staff and/or students at City?

None of the above

H8.1) If you intend to contact staff/students directly for recruitment purpose, please upload a letter of approval from the respective School(s)/Department(s).

H9) How are participants to be identified, approached and recruited, and by whom?

Participants:

The sample for this study will be couples who have sought out couple therapy through Relate (the relationship charity) but are on the waiting list for their first counselling appointment. There will be no exclusions based on sexuality, age, ethnicity gender and race. Voluntary data will be collected on the gender, sexuality, ethnicity and relationship status and participants will be asked to give explicit consent for this information to be used in the research so the data can be evaluated within these contexts.

Setting:

Identification: Relate therapists will identify suitable participants during the IA. As a final clarification that they are suitable and not too high conflict, they will cover an additional screening process (see H10).

Recruitment:

Having been assessed as suitable for the study, couples will be told about the study by the Relate Therapist and, if they express interest and still appear safe (see screener at H10), they will be handed a participant information sheet (or they may receive it through the post). Participant information sheets will not be handed to any couples where the therapist has any doubts about their suitability for the study without supervisor consultation and/or consultation with the researcher.

All Relate Centres participating in the recruitment will be briefed on the nature and profile of the study to aid their ability to screen out unsuitable / high risk participants (particularly in terms of domestic abuse/violence) as well as to answer straightforward questions. However, to minimise the workload for Relate, participants will be encouraged to contact the researcher directly to ask questions about the research or on points of clarification. This is voluntary and their decision will have no impact on their counselling with Relate.

H10) Please upload your participant information sheets and consent form, or if they are online (e.g. on Qualtrics) paste the link below.

H11) If appropriate, please upload a copy of the advertisement, including recruitment emails, flyers or letter.

H12) Describe the procedure that will be used when seeking and obtaining consent, including when consent will be obtained.

Participants will be given a copy of the participant information sheet at the Relate Centre involved in recruitment. Participants will read this in their own time and post back a signed consent form to the researcher if they are consenting to participate. Once consent has been obtained, couples will be randomly allocated into one of the two test conditions (Control group / Intervention group). Couples can commence the study as soon as they have signed informed consent. This means that couples will be entering the study at different points over a four month period until the full sample is recruited and data collected.

Explicit consent:

Voluntary data will be collected at the same time as the consent form with an additional explicit consent section on the gender, sexuality, ethnicity and relationship status and participants will be asked to give explicit consent for this information to be used in the research so the data can be evaluated within these contexts.

H13) Are there any pressures that may make it difficult for participants to refuse to take part in the project?

Yes

H13.1) Please provide details and describe how you propose to address these.

The only anticipated pressure is if one partner wants to participate and the other doesn't. Both partners need to participate and sign the consent form to initiate recruitment and engagement in the study. To mitigate against this pressure, Relate therapists conducting the IA will clarify with couples that they should only consent if both are in favour of

participating in the study. In addition, both signatures are required on the participant consent form.

H14) Is any part of the research being conducted with participants outside the UK? No  
*The options for the following question are one or more of:*

*'Invasive procedures (for example medical or surgical)'; 'Intrusive procedures (for example psychological or social)'; 'Potentially harmful procedures of any kind'; 'Drugs, placebos, or other substances administered to participants'; 'None of the above'.*

M1) Will any of the following methods be involved in the project:

None of the above

M2) Does the project involve any deceptive research practices? No

M3) Is there a possibility for over-research of participants? No

M4) Please upload copies of any questionnaires, topic guides for interviews or focus groups, or equivalent research materials.

M5) Will participants be provided with the findings or outcomes of the project? Yes

M5.1) Explain how this information will be provided.

Participants will express their interest in receiving a summary report. If this is something they request then it will be posted or emailed to them once the data is analysed.

M6) If the research is intended to benefit the participants, third parties or the local community, please give details.

The benefits of the research are in terms of participants receiving the Relationship Education programme. It is hoped that this will have the benefit of providing useful and possibly transforming information to the couples whilst they are on the waiting list for counselling, but if not then at least it is hoped that the format will prevent further deterioration of the relationship whilst they are waiting. Consequentially it is anticipated that any improvement in the couple relationship will have a positive effect on children and others around the couple who may have been adversely affected by their distress. It is also anticipated that the programme may benefit the Relate therapists as the couple will hopefully have developed greater clarity about the issues that are causing their relationship distress.

M7) Are you offering any incentives for participating?

No

M8) Does the research involve clinical trial or clinical intervention testing that does not require Health Research Authority or MHRA approval?

No

M9) Will the project involve the collection of human tissue or other biological samples that does not fall under the Human Tissue Act (2004) that does not require Health Research Authority Research Ethics Service approval?

No

M10) Will the project involve potentially sensitive topics, such as participants' sexual behaviour, their legal or political behaviour, their experience of violence?

No

M11) Will the project involve activities that may lead to 'labelling' either by the researcher (e.g. categorisation) or by the participant (e.g. 'I'm stupid', 'I'm not normal')?

No

D1) Indicate which of the following you will be using to collect your data.

Questionnaire

Audio/digital recording interviewees or events

D2) How will the privacy of the participants be protected?

De-identified samples or data

D3) Will the research involve use of direct quotes?

Yes

D5) Where/how do you intend to store your data?

Data to be kept in a locked filing cabinet

Data and identifiers to be kept in separate, locked filing cabinets

Password protected computer files

Storage on encrypted device (e.g. laptop, hard drive, USB  
Storage at City  
D6) Will personal data collected be shared with other organisations?  
No  
D7) Will the data be accessed by people other than the named researcher, supervisors or examiners?  
No  
D8) Is the data intended or required (e.g. by funding body) to be published for reuse or to be shared as part of longitudinal research or a different/wider research project now or in the future?  
No  
D10) How long are you intending to keep the research data generated by the study?  
A minimum of 10 years.  
D11) How long will personal data be stored or accessed after the study has ended?  
Until after graduation  
D12) How are you intending to destroy the personal data after this period?  
All confidential data will be destroyed in accordance with City policy, using confidential bags and correct destruction procedure or shredding using appropriate shredding device.  
<https://www.city.ac.uk/about/city-the-community-and-environment/what-we-do/recycling-and-waste>

HS1) Are there any health and safety risks to the researchers over and above that of their normal working life?  
No  
HS3) Are there hazards associated with undertaking this project where a formal risk assessment would be required?  
No

## City, University of London

Dear Priscilla

**Reference: ETH1819-0055**

**Project title: RELATIONSHIP-WISE: A mixed methods study to assess the feasibility of an online relationship education program to support couple relationships**

**Start date: 15 Apr 2019**

**End date: 26 Jul 2019**

I am writing to you to confirm that the research proposal detailed above has been granted formal approval from the Psychology committee: medium risk. The Committee's response is based on the protocol described in the application form and supporting documentation. Approval has been given for the submitted application only and the research must be conducted accordingly. You are now free to start recruitment.

Please ensure that you are familiar with [City's Framework for Good Practice in Research](#) and any appropriate Departmental/School guidelines, as well as applicable external relevant policies.

Please note the following:

### **Project amendments/extension**

You will need to submit an amendment or request an extension if you wish to make any of the following changes to your research project:

- Change or add a new category of participants;
- Change or add researchers involved in the project, including PI and supervisor;
- Change to the sponsorship/collaboration;
- Add a new or change a territory for international projects;
- Change the procedures undertaken by participants, including any change relating to the safety or physical or mental integrity of research participants, or to the risk/benefit assessment for the project or collecting additional types of data from research participants;
- Change the design and/or methodology of the study, including changing or adding a new research method and/or research instrument;
- Change project documentation such as protocol, participant information sheets, consent forms, questionnaires, letters of invitation, information sheets for relatives or carers;
- Change to the insurance or indemnity arrangements for the project;
- Change the end date of the project.

### **Adverse events or untoward incidents**

You will need to submit an Adverse Events or Untoward Incidents report in the event of any of the following:

- a) Adverse events
- b) Breaches of confidentiality
- c) Safeguarding issues relating to children or vulnerable adults
- d) Incidents that affect the personal safety of a participant or researcher

Issues a) and b) should be reported as soon as possible and no later than five days after the event. Issues c) and d) should be reported immediately. Where appropriate, the researcher should also report adverse events to other relevant institutions, such as the police or social services.

Should you have any further queries relating to this matter, please do not hesitate to contact me. On behalf of the Psychology committee: medium risk, I do hope that the project meets with success.

Kind regards



Psychology committee: medium risk

City, University of London

### **Ethics ETH1819-0055: Priscilla Short (Medium risk)**

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#### **Ethics ETH1819-0922: Mrs Priscilla Short (Medium risk): Application**

Details of modification

The original design included use of the CSI-32 (Funk & Rogge, 2007) as quantitative measurement. This amendment asks to replace the CSI-32 with two alternative, validated measures: Investment Model Scale (IMS) (Rusbult, Martz & Agnew, 1998) to measure relationship satisfaction, commitment level & investment size

Pair Inventory (Schaefer & Olson, 1981) to measure emotional intimacy

SA3) Justify why the amendment is needed

These validated measures better match the target of intervention for the videos (i.e. commitment levels, investment size, emotional intimacy and relationship satisfaction) than the more general CSI-32 measurement of relationship satisfaction.

### **City, University of London**

Dear Priscilla

**Reference: ETH1819-0922**

**Project title: RELATIONSHIP-WISE: A mixed methods study to assess the feasibility of an online relationship education program to support couple relationships**

**Start date: 15 Apr 2019**

**End date: 26 Jul 2019**

I am writing to you to confirm that the research proposal detailed above has been granted formal approval from the Psychology committee: medium risk. The Committee's response is based on the protocol described in the application form and supporting documentation. Approval has been given for the submitted application only and the research must be conducted accordingly. You are now free to start recruitment.

Please ensure that you are familiar with [City's Framework for Good Practice in Research](#) and any appropriate Departmental/School guidelines, as well as applicable external relevant policies.

Please note the following:

## **Project amendments/extension**

You will need to submit an amendment or request an extension if you wish to make any of the following changes to your research project:

- Change or add a new category of participants;
- Change or add researchers involved in the project, including PI and supervisor;
- Change to the sponsorship/collaboration;
- Add a new or change a territory for international projects;
- Change the procedures undertaken by participants, including any change relating to the safety or physical or mental integrity of research participants, or to the risk/benefit assessment for the project or collecting additional types of data from research participants;
- Change the design and/or methodology of the study, including changing or adding a new research method and/or research instrument;
- Change project documentation such as protocol, participant information sheets, consent forms, questionnaires, letters of invitation, information sheets for relatives or carers;
- Change to the insurance or indemnity arrangements for the project;
- Change the end date of the project.

## **Adverse events or untoward incidents**

You will need to submit an Adverse Events or Untoward Incidents report in the event of any of the following:

- a) Adverse events
- b) Breaches of confidentiality
- c) Safeguarding issues relating to children or vulnerable adults
- d) Incidents that affect the personal safety of a participant or researcher

Issues a) and b) should be reported as soon as possible and no later than five days after the event. Issues c) and d) should be reported immediately. Where appropriate, the researcher should also report adverse events to other relevant institutions, such as the police or social services.

Should you have any further queries relating to this matter, please do not hesitate to contact me. On behalf of the Psychology committee: medium risk, I do hope that the project meets with success.

Kind regards

[REDACTED]  
Psychology committee: medium risk

City, University of London

**Ethics ETH1819-0922: Priscilla Short (Medium risk)**

## **Ethics ETH1819-1610: Mrs Priscilla Short (Medium risk)**

### **Details of modification**

1. Amendment to data collection format: They survey will be administered online via Qualtrics as well as a postal survey.
2. Increase in number of conditions: The number of conditions has been increased from two to three (b is the new condition):
  - a. Control (wait list as normal)
  - b. Control video activity (watching a nature video whilst on waiting list)
  - c. Treatment group (three relationship education video modules)
3. Addition of three nature videos: The three videos in condition B are:
  - a. Touched by a wild mountain gorilla (3:23)  
<https://www.youtube.com/watch?v=x2H7zcqjplc>
  - b. Emperor penguins in Antarctica (5:17 mins)  
<https://www.youtube.com/watch?v=c7M686pXr6M>
  - c. The beauty of planet earth (5:44 mins)  
[https://www.youtube.com/watch?v=SWELdS1fG\\_E](https://www.youtube.com/watch?v=SWELdS1fG_E)
5. Electronic randomization of participants using Qualtrics: Participants will be randomly allocated to each condition using Qualtrics' randomizing software prior to accessing the patient information sheet and consent form.
5. Electronic dictation and data transfer: Instead of the participants in condition C being posted a Dictaphone to complete their audio recording, they will be sent an email link following completion of the second (T2) questionnaire providing them with the same instructions and guidelines that would have been posted. Instead of recording their audios on a Dictaphone, participants will record on their smartphone and will be provided with instructions on how to do this and then return the audio recording securely and confidentially to the researcher using a password-protected email.

**City, University of London**

Dear Priscilla

**Reference: ETH1819-1610**

**Project title: RELATIONSHIP-WISE: A mixed methods study to assess the feasibility of an online relationship education program to support couple relationships**

**Start date: 15 Apr 2019**

**End date: 26 Jul 2019**

I am writing to you to confirm that the research proposal detailed above has been granted formal approval from the Psychology committee: medium risk. The Committee's response is based on the protocol described in the application form and supporting documentation. Approval has been given for the submitted application only and the research must be conducted accordingly. You are now free to start recruitment.

Please ensure that you are familiar with [City's Framework for Good Practice in Research](#) and any appropriate Departmental/School guidelines, as well as applicable external relevant policies.

Please note the following:

#### **Project amendments/extension**

You will need to submit an amendment or request an extension if you wish to make any of the following changes to your research project:

- Change or add a new category of participants;
- Change or add researchers involved in the project, including PI and supervisor;
- Change to the sponsorship/collaboration;
- Add a new or change a territory for international projects;
- Change the procedures undertaken by participants, including any change relating to the safety or physical or mental integrity of research participants, or to the risk/benefit assessment for the project or collecting additional types of data from research participants;
- Change the design and/or methodology of the study, including changing or adding a new research method and/or research instrument;
- Change project documentation such as protocol, participant information sheets, consent forms, questionnaires, letters of invitation, information sheets for relatives or carers;
- Change to the insurance or indemnity arrangements for the project;
- Change the end date of the project.

#### **Adverse events or untoward incidents**

You will need to submit an Adverse Events or Untoward Incidents report in the event of any of the following:

- a) Adverse events
- b) Breaches of confidentiality
- c) Safeguarding issues relating to children or vulnerable adults
- d) Incidents that affect the personal safety of a participant or researcher

Issues a) and b) should be reported as soon as possible and no later than five days after the event. Issues c) and d) should be reported immediately. Where appropriate, the researcher should also report adverse events to other relevant institutions, such as the police or social services.

Should you have any further queries relating to this matter, please do not hesitate to contact me. On behalf of the Psychology committee: medium risk, I do hope that the project meets with success.

Kind regards

[REDACTED]  
Psychology committee: medium risk

City, University of London

### **Ethics ETH1819-1610: Priscilla Short (Medium risk)**

### **Ethics ETH1920-0282: Mrs Priscilla Short (Medium risk)**

Sample profile: Existing approval is for participants to be recruited from Relate's waiting list (1819-0055). The new participant group being requested in this amendment is 'as found' couples who are not currently in the process of seeking counselling support for their relationship.

Changes to participant information sheet and consent form: The changes to the participant information sheet have been to delete reference to 'Relate' and all references to 'ongoing counselling' and to 'waiting lists'. There are no changes to the explicit consent form, but the first item (1) has been slightly amended on the consent form to remove reference to 'Relate'.

Changes to measures: None

Changes to data collection method: None. Ethical approval has been granted for both a paper-based postal version of this study (1819-0055) and an online Qualtrics version (1819-1610). Participants will be given the option of which method they prefer although will be encouraged to participate online.

Screening: Based on literature about the ethics of screening in couple and relationship education (CRE) (Bradford, Hawkins & Acker, 2015) there will be no screening in the 'as found' sample based on levels of distress. However, as with the Relate sample, couples will be asked to sign a statement confirming that there are no current court cases, child protection orders, molestation orders, injunctions or other legal proceedings relating to the couple or immediate family. All couples will be provided with contact details for Relate so they can easily access more intensive relationship support if they feel in need of it, either during or on completion of the study.

Recruitment for this new control group of participants will be 'snowball' sampling, using friends, colleagues and contacts of the researcher to recruit couples who are not personally known to or known-of by the researcher (or vice versa). Friends and colleagues will invite couples by sending them a link to the participant information sheet and consent form on Qualtrics.

Assessment: Couples interested in participating will use the link to access Qualtrics where they can read the online participant information sheet.

SA3) Justify why the amendment is needed

Existing literature on couple and relationship education (CRE) provides a strong rationale for including both distressed and non-distressed couples in CRE research as that it can be just as effective and valuable for non-distressed couples and that the emphasis should be on both groups (Markman & Ritchie, 2015).

Another reason for including couples not seeking counselling is suggested by Bradford, Hawkins and Acker (2015) who have found evidence that couples participating in CRE classes are more likely to seek therapeutic help later on for relationship problems, and this is especially the case for African American and lower income couples (Williamson, Trail, Bradbury, & Karney, 2014). Hence, participation in CRE may decrease stigma for seeking relationship help and become a gateway to future therapy.

## City, University of London

Dear Priscilla

**Reference: ETH1920-0282**

**Project title: RELATIONSHIP-WISE: A mixed methods study to assess the feasibility of an online relationship education program to support couple relationships**

**Start date: 15 Apr 2019**

**End date: 26 Jul 2019**

I am writing to you to confirm that the research proposal detailed above has been granted formal approval from the Psychology committee: medium risk. The Committee's response is based on the protocol described in the application form and supporting documentation. Approval has been given for the submitted application only and the research must be conducted accordingly. You are now free to start recruitment.

**The approval was given with the following conditions:**

- as stated in the last decision letter, the committee was concerned about the wording in the Participant Information sheet stating that '...you have been asked by a friend...' while you have now provide detailed explanation on how participants are recruited the wording in the Participant Information sheet should also be amended to reflect that participant were made aware of the study rather than asked which may imply that they have been told to do so rather than participating voluntarily.

Please ensure that you are familiar with [City's Framework for Good Practice in Research](#) and any appropriate Departmental/School guidelines, as well as applicable external relevant policies.

Please note the following:

### **Project amendments/extension**

You will need to submit an amendment or request an extension if you wish to make any of the following changes to your research project:

- Change or add a new category of participants;
- Change or add researchers involved in the project, including PI and supervisor;
- Change to the sponsorship/collaboration;
- Add a new or change a territory for international projects;

- Change the procedures undertaken by participants, including any change relating to the safety or physical or mental integrity of research participants, or to the risk/benefit assessment for the project or collecting additional types of data from research participants;
- Change the design and/or methodology of the study, including changing or adding a new research method and/or research instrument;
- Change project documentation such as protocol, participant information sheets, consent forms, questionnaires, letters of invitation, information sheets for relatives or carers;
- Change to the insurance or indemnity arrangements for the project;
- Change the end date of the project.

#### **Adverse events or untoward incidents**

You will need to submit an Adverse Events or Untoward Incidents report in the event of any of the following:

- a) Adverse events
- b) Breaches of confidentiality
- c) Safeguarding issues relating to children or vulnerable adults
- d) Incidents that affect the personal safety of a participant or researcher

Issues a) and b) should be reported as soon as possible and no later than five days after the event. Issues c) and d) should be reported immediately. Where appropriate, the researcher should also report adverse events to other relevant institutions, such as the police or social services.

Should you have any further queries relating to this matter, please do not hesitate to contact me. On behalf of the Psychology committee: medium risk, I do hope that the project meets with success.

Kind regards

[REDACTED]  
Psychology committee: medium risk

City, University of London

#### **Ethics ETH1920-0282: Priscilla Short (Medium risk)**

#### **Ethics ETH2021-0308: Mrs Priscilla Short (Medium risk): Application**

SA1) Types of modification/s

Change the design and/or methodology of the project, including changing or adding a new research method and/or research instrument

SA2) Details of modification

Utilise transcription software to transcribe qualitative audio interviews

SA3) Justify why the amendment is needed

Because of the number of audio interviews to transcribe (32)

SA4) Other information

This is a retrospective application

# **City, University of London**

Dear Priscilla

**Reference: ETH2021-0308**

**Project title: RELATIONSHIP-WISE: A mixed methods study to assess the feasibility of an online relationship education program to support couple relationships**

**Start date: 15 Apr 2019**

**End date: 26 Jul 2019**

I am writing to you to confirm that the research proposal detailed above has been granted formal approval from the Psychology committee: medium risk. The Committee's response is based on the protocol described in the application form and supporting documentation. Approval has been given for the submitted application only and the research must be conducted accordingly. You are now free to start recruitment.

**The approval was given with the following conditions:**

please ensure that the transcription software complies with General Data Protection Regulation (GDPR)/data protection legislation

Please note the following:

## **Project amendments/extension**

You will need to submit an amendment or request an extension if you wish to make any of the following changes to your research project:

- Change or add a new category of participants;
- Change or add researchers involved in the project, including PI and supervisor;
- Change to the sponsorship/collaboration;
- Add a new or change a territory for international projects;
- Change the procedures undertaken by participants, including any change relating to the safety or physical or mental integrity of research participants, or to the risk/benefit assessment for the project or collecting additional types of data from research participants;
- Change the design and/or methodology of the study, including changing or adding a new research method and/or research instrument;
- Change project documentation such as protocol, participant information sheets, consent forms, questionnaires, letters of invitation, information sheets for relatives or carers;
- Change to the insurance or indemnity arrangements for the project;
- Change the end date of the project.

## **Adverse events or untoward incidents**

You will need to submit an Adverse Events or Untoward Incidents report in the event of any of the following:

- a) Adverse events
- b) Breaches of confidentiality
- c) Safeguarding issues relating to children or vulnerable adults
- d) Incidents that affect the personal safety of a participant or researcher

Issues a) and b) should be reported as soon as possible and no later than five days after the event. Issues c) and d) should be reported immediately. Where appropriate, the researcher should also report adverse events to other relevant institutions, such as the police or social services.

Should you have any further queries relating to this matter, please do not hesitate to contact me. On behalf of the Psychology committee: medium risk, I do hope that the project meets with success.

Kind regards

[REDACTED]  
Psychology committee: medium risk

City, University of London

**Ethics ETH2021-0308: Priscilla Short (Medium risk)**

## **Appendix M: Debrief form**



### **STUDY DEBRIEF INFORMATION**

#### **Study Title:**

**A mixed methods study to assess the feasibility of an online relationship education program to support couple relationships**

Thank you for taking part in this study. Now that it is finished we'd like to summarise the purpose of the study and to provide you with information for any ongoing contact. The purpose of the research was to evaluate whether a brief Relationship Education Programme (REP) can positively benefit couples that have decided to engage in couple therapy.

The REP comprises three video modules that are viewed over a three-week period at intervals of one per week (approximately). Having watched each video together, couples then discuss the content and endeavour to apply what they have learned to their own relationship.

Participating couples were randomly allocated into one of three groups, as follows:

- D. Control group (doing nothing different from usual).
- E. Watching and discussing three short (5 minute) nature videos together over two weeks.
- F. Watching and discussing three short (15 minute) REP videos together over two weeks.

All three groups are vitally important in order to generate meaningful data. Group A enables us to compare any impact of the REP (Group C) with couples doing nothing different from normal. Group B enables us to compare any impact of the REP (Group C) with couples watching and discussing three non-REP videos together so we can see if it is simply the activity of watching and discussing three videos that accounts for any impact. So, groups A and B act as 'controls' to evaluate the specific contribution, if any, made by the REP on relationship satisfaction over the two week period.

Some couples may find that participating in the programme raises some concerns about their relationship. If this has happened to you then Relate provide a telephone support service and an online chat service that can be accessed through their website: [www.relate.org.uk](http://www.relate.org.uk) or on their phone number 0300 100 1234.

If any issues or concerns have come up during the research then there are many national organisations that can offer you support:

Relate. Tel: 0300 100 1234  
The Samaritans. Tel: 116 123  
Mind. Tel: 0300 123 3393  
Womens Aid. Tel: 0808 2000 247  
ManKind 01823 334244

Finally, if you are a Relate participant then under GDPR your Relate counsellor won't know that you've been involved in the research. However, it may be helpful or relevant for them to know so please feel free to tell them, especially if you decide to watch the relationship education videos prior to or in conjunction with your counselling.

Thank you again for your commitment and support to the study. If you have any other questions please do not hesitate to contact us at the following:



Ethics approval code: ETH1819-0055

## Appendix N: Transcription grid (acceptability)

IDENTIFI ER	Rel. Sat. score	TRANSCRIPTION SEGMENT	CODING FOR REACTION
R3A (male)	T1: Low (1) T2: Low (2.4)	<i>I thought it was a worthwhile exercise.... The discussions afterwards were kind of useful start points but I don't really see them as anything, um, as much more than a start point at this stage. I certainly don't think we got something that we were happy with by the end of video three.... I think it's made it easier to talk about something things in a .... For it to be easier to talk about things in a civil way.... It gives you a reference point, something to think about and, you know, just in day to day life, which I think is quite useful. I think most useful was that it was clear and we were both able to relate to some of the examples which I think is quite good. I think having lots of examples about certain outcomes and how you may feel certainly gave a greater credibility and made it easier to start thinking about yourself and the other person.</i>	Quite positive
R3B (female)	T1: Med (2.8) T2: Med (3.8)	<i>I liked all the stuff on communication as that's an area we really struggle with .....and it really helped to be able to talk about how different we are from one another. We talked about how we come at things from different angles and that we don't always realise that. So that was all really useful stuff. The complete set of stuff was useful.</i>	Very positive
R8A (female)	T1: Low (2.4) T2: Med (2.8)	<i>I thought the programme was really helpful and I'm really glad that we had taken a decision to take part in.... To add to what we found helpful about the program the videos no doubt were the most helpful part of the programme. The duration of 15 minutes felt a perfect amount of time to be able to cover a bit of detail and in terms of the patience we have to sit in one place only to concentrate for 15 minutes, it felt like the right amount of time. And the end of each of the videos was super helpful although at times some of it was potentially stating what we already know, it was good to hear that from that from a professional so to speak. And just to bring that message home..... I would most definitely recommend them to other couples. It's just a nice way for you to, in private with your partner, be able to sit down and listen to the advice that's being given and then have the ability and the option to discuss straight after or, you know after at least one of the videos that we watched, we decided through the request of my husband not to discuss it straight after, but it takes some time, think about what we had heard and then come back and talk about it.</i>	Very positive
R8B (male)	T1: Low (1.8) T2: Low (2.4)	<i>I walked away with a very positive perspective on the programme..... we are waiting for therapy and it's always good to have a third party there when you hear this advice for the first time.... You can tend to react to it and start conversations that may not go down the route that you want. I think a lot of the things we heard were things we innately knew. But it was good to hear them from someone else..... we are still waiting for a counsellor and I don't think the videos are a substitute for that. Most helpful was having a core set of principles ..... at least we now align on those and it helped us articulate that to each other in a common language and common framework. That to me was very helpful..... I would recommend it as a combination to counselling.</i>	Very positive
AF13 (male)	T1: High (6.0) T2: High (6.0)	<i>The programme highlighted how relationships can be allowed to plod along without any real thought about the building blocks that go into them.... The overall experience was positive. I think it gave me a reminder of who we are and where we need to make an effort to continue to grow and develop and have a positive relationship.... It has given us an opportunity to reflect on what we need to do to be good to each other and I think it's highlighted things that had moved on to the back burner that perhaps we could do better.</i>	Very positive
AF13A (female)	T1: Med (5.2) T2: Med (5.2)	<i>I felt that some parts were really interesting and other parts didn't really, maybe, relate to us. It gets you thinking about things in different ways.... We kind of felt we were in quite a good place relationship wise. There's always things that can be improved and things that are really good and that changes through time and things are occurring at that time. So yeah, sort of me. You learn some stuff and that's great. If you don't, then you haven't lost anything.</i>	Quite positive
AF15A (male)	T1: High (6.8) T2: High (6.8)	<i>I think that quite quickly, the tone, very gentle, was very helpful. There was also a sense in which it was quite commonsensical. That's not to say it's not useful. It's very useful. But I can't quite quickly that we weren't going to be taken anywhere surprising or anywhere that we didn't recognize, but that, as always, just having it spoken is always helpful because long periods of silence aren't helpful especially if they carry on for years. So, I'm just saying some something is helpful and saying something sensible is even more helpful. And also, it didn't feel at all jarred in pace, I didn't feel as though we were being in any kind of laboratory situation, that it was very down to earth and quite domestic in that sense.</i>	Very positive
AF15B (female)	T1: High (7.4) T2: High (7.0)	<i>I was pleasantly surprised, although I didn't really know what to expect, but I thought your presentations were very clear and thought provoking and the three videos built really well on previous one. And so, I think I was pleasantly surprised and also initially surprised that my husband was a bit hesitant about the whole experience but actually took it very seriously and I think gained something from it. I would say it was a very positive experience because you very rarely stop to</i>	Very positive

		<i>think about your relationship. And it gave us pause for thought, particularly about how we tackle problems and how we are at talking about problems.</i>	
AF17A (female)	T1: High (8.0) T2: High (7.8)	<i>We enjoyed it a lot.... It was a really helpful reminder on lots of things.... I wouldn't say our relationship has significantly changed, but we're in a very good place so far. Still in a good place. But I've had a lot more joy doing things for my partner, or doing nice things with him because I was like "oh, I'm investing in the good stuff now". And also, it made me more aware if I was investing something negative.... I think often we frame our relationships as, you know, as good as it feels. But actually, it only feels as good as what we put into it. So, I think that as really helpful.... I think it's useful for all couples.</i>	Quite positive
AF17B (male)	T1: High (7.2) T2: High (6.8)	<i>I really enjoyed watching the video was actually I was really hoping that we would be part of that group that was able to watch the videos, um, and found the really insightful and some pretty nice new ways of looking at relationships. Um, just so that that I really enjoyed that met my expectations actually.</i>	Very positive
AF39A (female)	T1: High (5.8) T2: High (7.2)	<i>The experience was that it was more simple than I imagined it was going to be in a good way. I thought it was. It was very, very clearly laid out for your program. I saw. I mean, really much clearer than I thought it would be longer and more involved. But I thought your program was very clear and thorough and modelling very simple and very effective..... I really liked the simple framework of the whole your whole program and the clarity of it. The image of the relationship. As an entity in its own right, that we both affect what we do in it, it's very empowering. I thought the Lego house was really excellent.</i>	Very positive
AF39B (male)	T1: High (5.6) T2: High (6.6)	<i>The one thing I thought was terrific was, was the idea of a relationship being almost like a separate entity, a sort of combined project, which I hadn't thought of in those terms before. And I found that really very interesting. So, in terms the actual experience of participating, it was I suppose it was about as much as I was expecting, but I did learn quite a lot, particularly that that last point.... I think one of the great things about having a relationship as a separate entity is that it negates the necessity for blame, I think. I think that's one of his great strengths. So well done. If that was your idea, it's terrific.</i>	Very positive
R50A (female)	T1: Low (1.4) T2: Low (1.4)	<i>The videos really focused our minds on our relationship and I think that helped a lot. I think it has given us an additional focus that is on the sort of practicalities of where we need to go from here. I don't think that it is entirely..... I don't think that it offers solutions and nor do I think it even attempts to or proclaims to offer solutions, that is very much with us..... I still think there are times when I would prefer to have somebody there to help navigate us through some difficult conversations. But the most helpful thing about the videos was to help us think about what we needed and my husband really found it helpful as a way of opening up, it was a sort of framework. .... So, I think that it was really really good..... and it helped us see that it is very much a joint thing about our relationship and what we were doing rather than any sort of feeling of guilt or blame.</i>	Very positive
R50B (male)	T1: Med (3.8) T2: Med (4.0)	<i>I think it was an interesting opportunity because we were quite disappointed when we found out that we'd have to wait quite a long time to for the proper counselling, and I think it was an opportunity for us to start discussing some issues in a more oriented and focused way..... it was an opportunity to start focusing more on some ...on some of these discussions we want to have but we weren't prepared or we were not prepared or we couldn't find out how to, to discuss those issues so it gave us a bit more of a focused approach to start having more meaningful conversations and, and try to move forward..... I think that there were there were some, some of the points explained in the videos that helped us direct some of the shouts we had, so some of the discussions we had. And the idea of also the idea of watching it together gave us a more common goal and something that we could actually share over this period over the last couple of weeks.</i>	Very positive
AF56A (male)	T1: High (7.6) T2: High (7.8)	<i>My experience the program was slight surprise that it was in the form of what I felt to be lectures. I was expecting sort of case studies and videos. There was some intriguing insights. I particularly liked the, the point you made about building blocks and um like, stacking Lego bricks on top of one another. It's not a fire and forget thing. And that's very vivid imagery that that reinforces the message that this is something that forming and maintaining a relationship is something that you have to keep working at every day.</i>	Quite positive
AF56B (female)	T1: High (7.2) T2: High (7.4)	<i>I actually really enjoyed it. Yeah, I enjoyed listening to you talk and... I think we got a lot out of talking to each other about what you'd said and then setting ourselves some objectives for the week. So, to sum up, it actually exceeded my expectations. I think the most helpful thing was to come up with some ideas of testing ourselves during the week, because it's very easy to hear somebody and think, gosh, that's good, that's good stuff. Yeah, but it's another thing actually doing something about it. So, I think the most helpful thing was the idea that you should identify some things that you could do differently that would be beneficial and then to actually put them into practice and then review it at the end of the week.</i>	Very positive
R62A (male)	T1: Low (1.8) T2: Low (2.4)	<i>Initially I felt quite dubious about the programme given its lack of personal contact with the therapist. I feel the experience was positive in a sense, but I think the biggest issue with the programme was that there was not the moderation effect of a therapist involved when conducting the discussions based on watching the videos. And therefore, it could become a bit of a blame situation..... most helpful was the guidance in terms of how to approach the relationship and the, kind of, requirement to discuss straight after with each other and to come up with a kind</i>	Quite positive

		<i>of concrete plan around how we would implement that in the upcoming week. That was most useful.</i>	
R62B (female)	T1: Med (4.8) T2: High (6.0)	<i>So, I do not think there was anything I can take away from this. It was just a video, three videos that gave us a general discussion and discussion about and give us a topic to generally discuss. But that it wasn't very applicable to us and it wasn't very, um, definitely did not leave an impression, did not teach us anything. I do not feel that we are better off now as compared to three weeks ago when we first started. And I do not believe that we even communicate better. Or in any way even try to change our ways because of a lack of emphasis from the video or the impression of video left. It just does not make you. I wouldn't. I mean to be honest with you the next day after watching the video just a day after it I would even remember what the video would be about..... The first week we sat on either end of the sofa and you know very nervous. And once it was done face each other and have a go at it. But by the third week we watched a video in each other's arms and I do believe that it had become more of a routine for us by the third week. We were more open to more understanding and less defensive compared to the first week. It was very fun and I felt that it brought us together because you know we had an activity to do together we had to do it at that time. At the same time together and discuss it and talk about how we felt and we had to be on it for the sake of our relationship about everything. So, I did things that watching the videos together did serve a great purpose.</i>	Quite positive
AF70 (female)	T1: High (6.1) T2: High (7.2)	<i>I think one of the things that stuck with me was to think of it as a job, just to, kind of, keep turning up for it and trying to put in the same level of energy and effort. I think, because it's very easy in relationships to start to take things for granted or just let things slide. So, I think that particular comment was a good reminder for me to have in my mind's eye about our relationship. And I think it has helped us feel perhaps more cohesive as a couple because we know more what the other thinks about things, which perhaps we didn't before.</i>	Quite positive
AF71-F	T1: High (8.0) T2: High (7.8)	<i>I thought it was very helpful and I just felt very positive about it. I looked forward to the videos each week and wished it could carry on, that there were more videos. I thought it was really good and have been recommending it to other people. It has made a big difference to the way we think and feel and are behaving.....</i>	Very positive
AF71-M	T1: High (7.1) T2: High (7.8)	<i>The experience of participating was really good, very positive. I found the videos very engaging, with good eye-contact and really well presented. ...The impact that it's had on our relationship has been to focus again on the relationship and how we build that, and deliberately take actions to strengthen it. Doing things, taking actions that help put the blocks into the relationship, and deliberately doing that.</i>	Very positive
R-150-M	T1: Low (2.4) T2: Med (3.6)	<i>It's helped me and it's helped my partner to be more open about our feelings and about each other, which has been useful.</i>	Very positive
R-150-F	T1: Med (3.4) T2: High (5.4)	<i>It was a really helpful, really well put together... yeah, it was really useful as well. It made us both really think about what was happening.....So I'd say it's had a really good impact on our relationship and we're going to try and carry on with that.</i>	Very positive
R261-F	T1: Low (0.0) T2: Med (4.0)	<i>It forced us to spend time together carrying out the activities and completing the homework, which was really beneficial..... I would very highly recommend this. I thought it was very easy to complete, comprehensive and a positive experience.</i>	Very positive
R261-M	T1: Low (1.0) T2: Med (4.2)	<i>Very positive, it's a great idea. Having something to act as a reference was really helpful, but I'd still like to have a reference to keep those lessons fresh and to refer back to them easily.</i>	Very positive
R1007A (male)	T1: Med (4.8) T2: Med (5.0)	<i>I was really impressed with the program, um, and I think there across all three videos there have been some really useful pointers and tips and things to consider and it's been really helpful discussion points to then have a discussion together, um, and aspects of the ... each of the videos has probably featured now, um, consciously and subconsciously probably in actually what we're doing and I'm actually kind of realizing that I'm sort of referring to things or at least thinking about things in the videos. So, so it's been ..... the experience has been great.</i>	Very positive
1007B (male)	T1: Med (4.6) T2: Med (4.0)	<i>I was just recognising and just thinking about things when often we weren't thinking about the effect that was having on the other person, even if it was a tiny thing. And it's actually mentally just noting that I think we found really, really helpful in terms of the most helpful thing. I think that was probably the most helpful technique that we learnt..... I think a really good concept was the fact that relationship isn't sort of just two people, it's sort of a separate entity that you both feed into. And I think both of us, that kind of lit a spark in both of our minds because that's a concept I hadn't heard before and it made so much sense, actually. And it's not about trying to change you or the person. It's about actually what can we create that's positive together. And now we have a kind of new sense purpose.</i>	Very positive
R-1009A (male)	T1: Med (5.0) T2: High (7.2)	<i>The actual experience was really good. I really liked the videos a lot. I think they were absolutely spot on. Very, very, very good videos. I really like them. Hundred percent sold. And I'm actually recommending them to my friends....</i>	Very positive

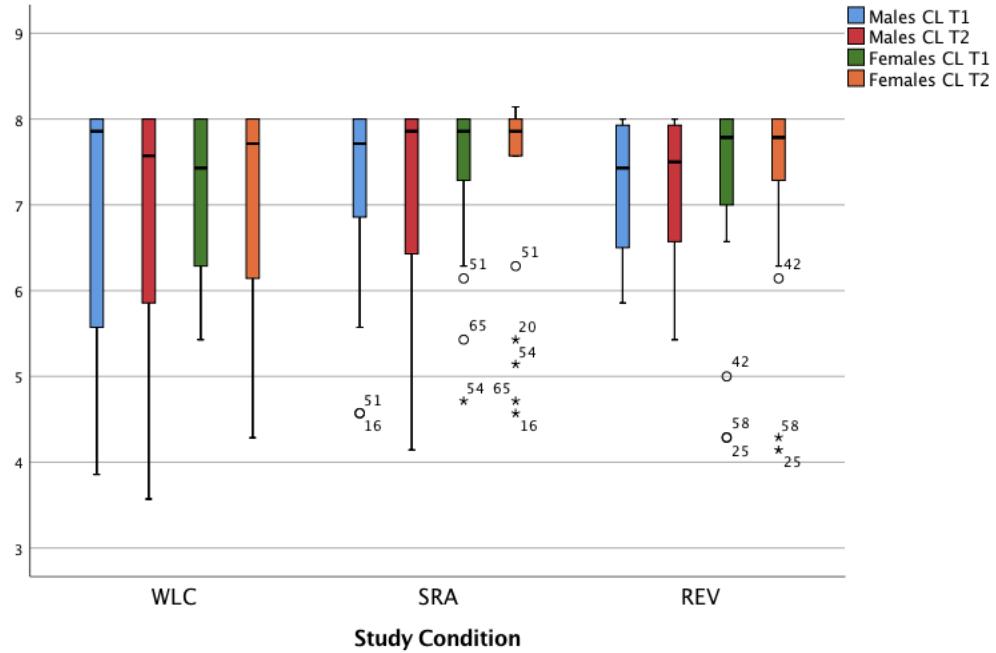
R-1009-B (male)	T1: Med (4.0) T2: High (5.6)	<i>Well, it was it was it was very valuable watching, watching the videos. I think. Even though we have decided to go on a break and we had decided that before watching the videos, I think it was nice to watch them together. And I guess it made it made me reflect on a lot of the things that had gone wrong and some of the reasons why we decided to take a break. And I think that if we don't get back together, I can still use what I learned from the videos for future relationships.</i>	Very positive
R-1010 (male)	T1 High (7.6) T2: High (7.2)	<i>I think it was useful to have the discussions and actually sit and talk about our relationship and I think it made us focus on that, which quite possibly we haven't done in the past.</i>	Very positive
R-276A	T1 Med: (3.2) T2 Med: (5.2)	<i>The programme has, as my husband said, got us talking more about our relationship before the therapy actually started. It made us think about a mission statement to support one another personally and professionally and be more loving and thoughtful and to actually put some time aside to talk and communicate each week, better.</i>	Very positive
R-276B	T1 Med: (3.2) T2 Med: (4.6)	<i>I had a positive overall experience from participating. Initially, I was a little sceptical but the videos were informative and got us talking about our relationship, which was a positive step.</i>	Very positive

*Note:* ID with 'AF' indicates 'As Found' sample population. ID with 'R' indicates Relate waiting list sample population

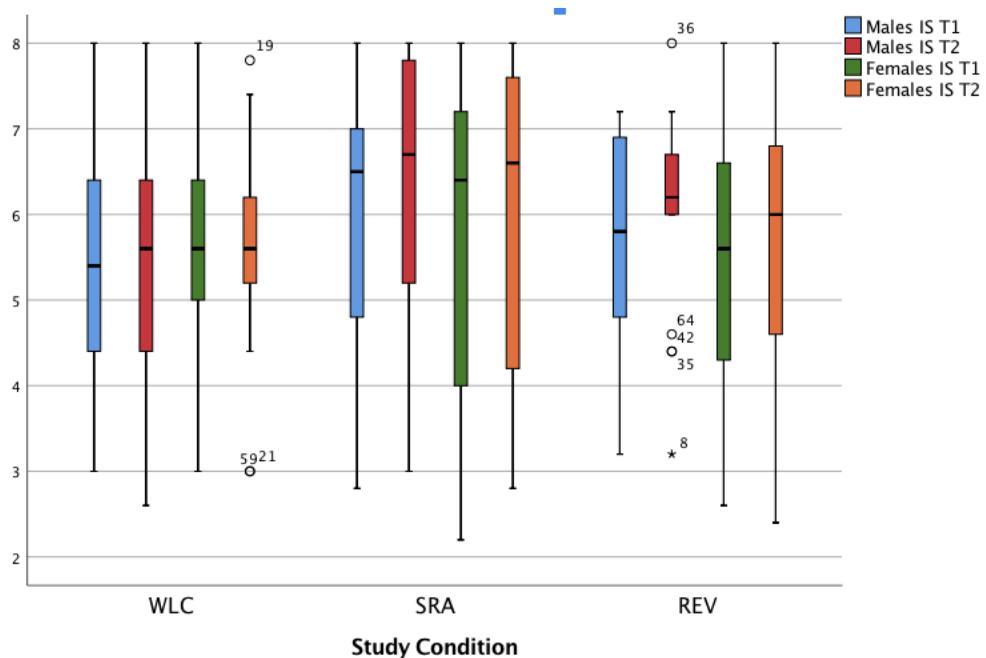
*Note:* High: 5.4-8, Medium: 2.7-5.3, Low: 0-2.6

## Appendix O: Box plots

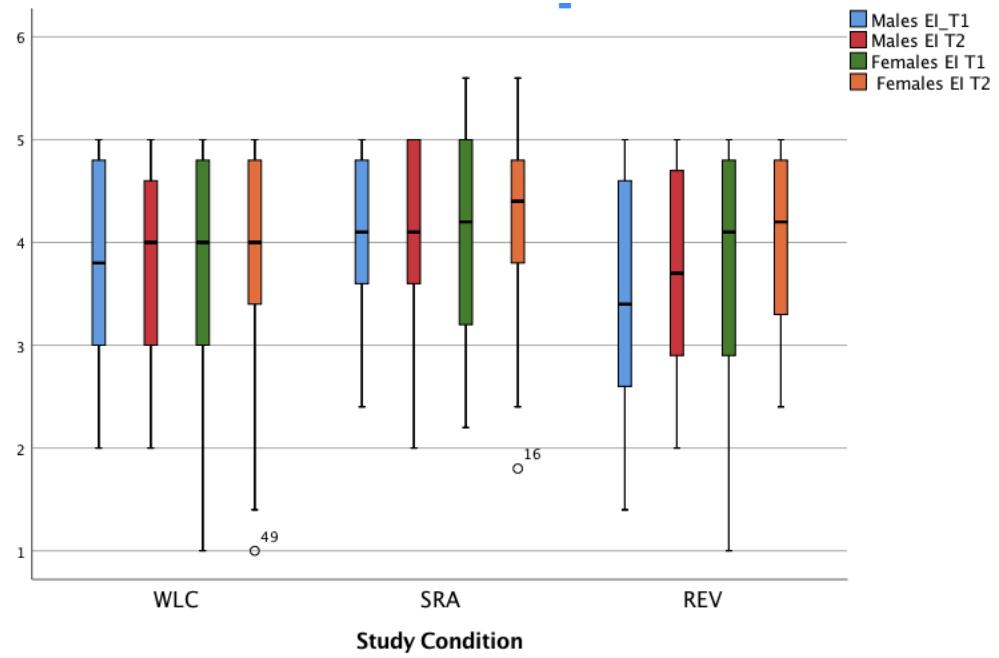
**Boxplot 1: Commitment Level (showing a few outliers due to concentrations around the median)**



**Boxplot 2: Investment size (showing a few outliers due to concentrations around the median)**



**Boxplot 3: Emotional Intimacy (showing no influencing outliers)**



**Boxplot 4: Relationship satisfaction (showing no outliers)**

