A QUALITATIVE REVIEW OF RELATIONSHIP MAINTENANCE STRATEGIES USED IN
COUPLE’S COUNSELING

By

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A Thesis Submitted to The Honors College
In Partial Fulfillment of the Bachelors degree
With Honors in
Family Studies and Human Development
THE UNIVERSITY OF ARIZONA
MAY 2019

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Abstract

There is minimal research to be found on relationship maintenance strategies as a method of treatment for romantic relationships in couples’ therapy. This phenomenological qualitative study analyzes the use of researched relationship maintenance strategies by licensed professional counselors in order to better understand the implications of these strategies in therapy treatment. A sample small size of four participants were identified as licensed professional counselors, 3 of which were currently practicing. Each participant was interviewed about their experiences counseling couples in romantic relationships and interviews were analyzed to discover the prevalence of relationship maintenance strategies being used by professional counselors in treatment of romantic relationships. Overarching themes that emerged from the data include: clinician’s perceived gap between relationship maintenance and repair, overlap of repair and maintenance, influence of relationship patterns on integration of relationship maintenance, and willingness to apply and broad applicability of relationship maintenance. One of the main findings found that there was a significant overlap of what clinician’s identified as conflict resolution and what researchers identified as relationship maintenance strategies. Implications for further research are discussed below.
Overview

According to Stafford and Canary (2002), resilience in marriage is achieved by engaging in specific maintenance strategies that assist in repairing, sustaining, and continuing a satisfactory relationship (Canary, Stafford, & Semic, 2002). Since the 1990’s researchers have been studying how romantic relationships are maintained with the use of various communication strategies (Stafford & Canary, 1991). Much had been said about how relationships dissolve or flourish, but at that point in time, there was little research that explained how these relationships were maintained over time. Specific strategies of maintenance have since been narrowed down to positivity, assurance, openness, sharing tasks, and social networks (Stafford & Canary, 1991). A key factor in the assessment of these behaviors is how they are perceived by the partner (Stafford & Canary, 1991). In other words, the way these maintenance strategies are viewed from the point of view of the receiving partner take as much a part in the relationship as the actual behaviors being shown by the other partner (Stafford & Canary, 1991). Ultimately, the success of a satisfying and strong romantic relationship requires work in order to produce higher levels of relationship quality and satisfaction. These five relationship maintenance strategies serve as efforts to continue that higher achieved relationship quality and, in turn, serve as conflict prevention (Dindia & Baxter, 1987).

Relational Maintenance Strategies

Previous research on relational maintenance has relied on four definitions for analysis of these behaviors including: “(1) Maintenance communication protects the relationship to keep it in existence (i.e., stable). (2) Relationship maintenance means preserving the status quo. (3) Maintenance involves keeping a relationship in a satisfactory condition. (4) Maintenance can refer to keeping the relationship in repair” (Dindia & Canary, 1993). Scholars explain that
couples can engage in specific strategies in order to maintain their relationships successfully according to this definition. Five principle relationship maintenance strategies measured by Stafford & Canary include positivity, assurance, openness, sharing tasks, and social networks (Canary et al., 2002). The measure used to assess these strategies has shown solid reliability in understanding partners’ use of these five maintenance behaviors being performed by the other partner (Canary et al., 2002). In order to provide context for the present study, it is important to define each of these maintenance strategies specifically. Positivity refers to behaviors including politeness and cheerfulness during conversations, and avoiding criticism even when difficult (Canary et al., 2002). Assurances are behaviors expressing love and commitment to convince the other person of their level of investment in the relationship (Canary et al., 2002). Openness includes freely discussing aspects of the relationship including sharing thoughts and feelings about how they perceive it (Canary et al., 2002). Sharing tasks refers to the equity of responsibilities being completed either around the house or everyday chores between partners (Canary et al, 2002). The strategy labeled as social networks explains the people that are important part of the each of the partner’s lives, like friends or family, and the time spent with those people either separately or together (Canary et al, 2002). According to this research, consistently implementing these maintenance strategies in a relationship can help a couple maintain resilience either by preventing relationship decay or as a means of repairing conflict (Canary et al, 2002).

**Relational Characteristics**

Certain relational characteristics that have been found to be supplemental pieces of relationship maintenance. In other words, some relationships have pre-existing features/characteristics that influence the relationship maintenance process that include control
mutuality, commitment, liking, and relational satisfaction (Stafford & Canary, 1991). Control mutuality includes whether or not each partner agrees about who decides the goals of the relationship and the behavioral routines. This is an important aspect because according to research, partners that do not have a high degree of control mutuality often find themselves arguing over control by engaging in forcing behaviors (Stafford & Canary, 1991). Commitment refers to the degree of a partner’s desire to stay in the relationship indefinitely, relevant to the social exchange perspective (Stafford & Canary, 1991). Commitment is crucial part of maintaining a relationship because if a partner sees that their partner is making an effort to keep up the relationship, they will be more likely to increase their commitment to the relationship (Stafford & Canary, 1991). Another relational characteristic includes liking, which measures how much partners like each other. Studies show that there is a link between liking and one partner’s perceptions of how the other partner engages in relationship maintenance strategies (Stafford & Canary, 1991). The final relational characteristic is relational satisfaction, or the degree to which the rewards of the relationship outweighs the cost, and the equitability of rewards for both partners (Stafford & Canary, 1991). In a study done by Bell, Daly, and Gonzalez (1987) there were considerable correlations of the self-reported use of maintenance strategies by wives, and the partner’s perception of the use of maintenance behaviors, and the level of marital satisfaction (Bell et al., 1987). A partner’s assessment of the relationship has been shown to be passively affected by how they perceive maintenance behaviors being attempted, and these four relational characteristics are strongly affected by the partner’s perceptions as well (Stafford & Canary, 1991). These relational features may be enhanced or preserved by one of or multiple previously mentioned maintenance behaviors (Stafford & Canary, 1991).
These preexisting relational characteristics are factors that influence one partner’s perception of the other partner’s effort to maintain the relationship and the likelihood of successful maintenance can be determined by the saliency of these relational features (Stafford & Canary, 1991). The bidirectional effect between these relational characteristics and relationship maintenance strategies ultimately explains how a partner’s perception of both of these elements reflect relationship satisfaction (Stafford & Canary, 1991). Further research has been conducted to determine how these relational characteristics are differentially affected by the success of implementing relationship maintenance strategies.

**Goals of Couple’s Therapy**

Despite the proven impact of couple’s therapy on improving relationship satisfaction, an impressively low number of couples seek help, though these numbers are slowly increasing (Doss, Atkins, & Christensen, 2003). In addition, these couples often reported a long-time span between when issues began in their relationship and their decision to seek professional help (Doss et al., 2003). The most common reason divorcing couples reported not seeking therapy was because they felt it was “too late” or it was being used as a last resort attempt to fix a relationship past repair (Doss et al., 2003). Some of most frequently cited reasons couples give for the dissolution of their relationship include growing apart, lack of love, and lack of affection (Barry, Lawrence, & Langer, 2008). The high divorce and pre-marital break-up rate can be attributed to a low level of partners’ ability to cope with the maintenance and repair of their relationship (Dindia & Baxter, 1987). There has been limited research to be found on the use of relationship maintenance being used in relational therapy treatment, but perhaps if more couples were implementing relationship maintenance strategies in their relationship, perhaps they would serve as more preventative measures to combatting feelings of growing apart or lack of love. For
example, a lack of behaviors displaying assurance in a relationship could lead to a lack of confidence in the presence of one partner, contributing to the dissolution that eventually leads them to seeking therapy.

Benson, McGinn, and Christensen have developed a universal protocol for approaching couple therapy. According to these researchers, all evidence-based models for treating couples in therapy have five principles in common (Barker & Chang, 2013). These concepts include: “Altering the couple’s view of the presenting problem to be more objective, contextualized and dyadic” (Barker & Chang, 2013). In other words, it is important that the therapist is able to use various techniques like questioning and explaining in order for the couple to see their issues in a systemic way, encouraging them to see their responsibility in the problem (Barker & Chang, 2013). The second principle, “Decreasing emotion-driven, dysfunctional behavior” creates an environment in therapy that is safe for the couple to communicate, which involves the therapist deescalating unhealthy interactions (Barker & Chang, 2013). The third principle, “Eliciting avoided emotions” refers to the therapist’s efforts to address more easily accessible emotions first, like fear or hurt, in order to elicit some emotions that are more difficult to process between partner’s, such as anger or criticism (Barker & Chang, 2013). The next two principles are “Improving communication” and “Promoting strengths” where in improving communication the therapist must educate the couple on communication skills and assess them for feedback, and in promoting strengths the therapist discusses previous and current strategies used by the couple, giving positive feedback on the helpful actions they are taking (Barker & Chang, 2013). This framework of principles is relative to couple’s therapy regardless of the theoretical approach a therapist chooses to base their treatment (Barker & Chang, 2013).
In summary, researchers note that therapists are actively treating couples with these five main principles. These principles may serve as an attempt to repair what can be described as a lack of maintenance being done between two partners in the relationship, leading to relational dissolution. The present study attempts to study the presence, or lack of presence, of relationship maintenance strategies being used by therapists in treatment of romantic relationships in efforts to understand if the relationship between relationship maintenance and its potential to increase relationship satisfaction is an important part of treatment to therapists.

**Purpose**

The purpose of this study is to gather information based on the unique experiences of licensed professional clinician’s in order to determine whether or not researched relationship maintenance strategies are being used in the treatment of romantic couples. In this qualitative study, we will analyze the information presented in interviews by the participating clinicians as well as identify the overarching themes across interviews that assist in the understanding the use, or lack thereof, of relationship maintenance strategies in the counseling methods of these professionals. Many previous studies done by Stafford & Canary have identified the importance of relationship maintenance strategies, the types of relationships in which they are observed, and their tie to relational characteristics (1991). However, few, if any, studies have identified the use of these strategies as a therapeutic method or recommendation by licensed counselors.

This study will serve in response to the gap in literature between relationship maintenance and its presence in therapy, it is important to gather more information to close that gap in order to provide the public with research on this topic as well as possibly influence clinicians in using these researched strategies as preventative measure in their client’s romantic relationships. Thus, my research questions: are professional counselors using researched
relationship maintenance strategies in their treatment methods of romantic couples, and if so, how? This question aims to examine the potential costs and benefits of the presence, or lack thereof, of relationship maintenance strategies in couples counseling by identifying overarching themes present in the experiences of licensed counselors.

**Methodology**

Due to limited information on the use of relationship maintenance strategies in therapeutic treatment by licensed couples professionals, we used a qualitative approach for this study to gather detailed examples of how the integration of relationship maintenance into treatment might look; in addition, our approach attempted to fill the gaps in the literature by identifying how relationship maintenance strategies were present in therapy practices, even unknowingly. Data collection and analysis was approached phenomenologically to focus on the shared experiences of and meaning therapists place upon relationship maintenance and how they integrate these strategies into their clinical work. Participants were recruited by email and through word of mouth. The small sample size included four participants. Participants included licensed mental health professionals of various ages. All of the participants identified as Licensed Marriage and Family Therapists. Three out of four participants were currently practicing. Two participants were male, and two participants were female. All four of the participants were married, which resulted in them providing comments based on their own marital experiences with relationship maintenance as well as those informed by their expertise and professional practice.

The principle investigator used a semi-structured open-ended interview process to interview each participant individually. Interviews were conducted both in-person and over Zoom video conferencing to accommodate those not in close proximity. Each interview took
approximately 35 minutes, ranging from 30 minutes to 45 minutes. An interview guide was used to gather information about the therapist’s perception of relationship maintenance as well as to learn more about specific experiences in which they had integrated it in their practice. Participants were assigned a pseudonym to them in order to maintain privacy, and those are used throughout the remainder of this manuscript. All interviews were audio recorded and then transcribed verbatim to be used for analysis. After transcription, audio recordings were discarded and cannot be accessed again. Transcriptions were stored in an online secure drive to ensure the maintaining of participant confidentiality, and audio recordings were deleted upon transcription. Transcriptions were de-identified to ensure confidentiality, with an alphabetic letter being the only identifying information of subject files.

Transcript analysis was completed by the principle investigator and advisor, first through open coding (Strauss & Corbin, 1998): reading and re-reading transcriptions individually until fully immersed and able to identify themes and interpret findings. During this phase, the principle investigator and advisor made individual lists of themes following the previously mentioned process of open coding. From that list we were able to identify overarching themes that were present across each of the interviews and designated these significant findings to specific themes. Upon discovery of these themes, we used a focus coding technique in the analysis of each interview. This technique (Charmaz, 2006) specifically identified quotes said by each participant that matched the themes that were identified in the previous open coding analysis. Once coding was completed, we reconvened to discuss aspects that could be condensed into more of the general themes, or eliminated entirely, such as subthemes that were initially included. Each theme was given a name following the clear identification of the theme. Both investigators then individually reanalyzed transcripts to verify the validity of these themes. Upon
completion, the principle investigator and advisor solidified and confirmed the validity of the final results that appeared from analysis, in order to accurately reflect the experiences of the participants.

**Results**

Upon the completion of open-coding the interview transcriptions, multiple themes became apparent within the data that served as evidence in answering the initial question developed for this research study: how are professional counselors using researched relationship maintenance strategies in their treatment of romantic couples? These themes serve to support the theory that relationship maintenance strategies are being used in couple’s therapy. The overarching themes that arose included: 1) *clinician’s perceived gap between relationship maintenance and repair*, 2) *overlap of repair and maintenance*, 3) *Relationship patterns influence integration of relationship maintenance*, and 4) *willingness to apply and broad applicability of relationship maintenance*. Each of these themes collectively provided interdependent information answering the research question as explained below.

**Clinician’s perceived gap between relationship maintenance and repair**

Participants identified that before maintenance could occur, their main clinical focus was repairing conflict that had inhibited the couple from maintaining their relationship at its current state. All participants made note of their initial responsibility of healing past wounds in contrast to discussing where the couple was currently succeeding and why those behaviors were proven to be beneficial to the relationship. In other words, each participant emphasized the importance of a healthy relationship foundation that couples needed to build through conflict repair before the maintenance strategies could be implemented in their relationships. In reference to their experience working with couples, Participant C explained:
In my main work of couples, maintenance isn’t the forefront of the work that we do, I would say it’s secondary to working with couples. When I work with them…it’s more aimed at creating security and safety in a relationship. And a lot of what we have to do is repair and heal the path before we can talk about maintenance.

Similarly, Participant A supported this finding by saying, “Usually if they’re coming into therapy, they don’t want to maintain what they already have, because they want something to change, they want something different in their relationship.” Participant B mentioned that they do not actively use relationship maintenance strategies in counseling because “there’s much less of me telling them what they should do otherwise, it’s through experience of having different communication that they sort of learn and grow.” Participant D explained that the majority of their couples were not coming in specifically to work on their maintenance because, “[The] majority are coming in with conflict, usually too late. Yeah, I would say that’s the majority where this has gone on for so long that it’s gotten to such a painful spot that they can’t do anything else. So, we often hear, ‘This is our last hope, this is our last shot.’”

Participants continued to speak of relationship maintenance as a secondary reinforcement method in having a healthy, romantic relationship in contrast to their main focus of treating couples by addressing previous conflict. In addition, Participant A went as far to say that couples address conflict in therapy as a result of losing the ability to self-maintain their relationship. In other words, the conflict was “much more backtracked to their loss of relationship maintenance.” In sum, participants believed there was a clear gap between the treatment they were giving their clients to repair conflict, and the encouragement of using relationship maintenance strategies as a method of counseling.

**Overlap of repair and maintenance**
This theme addresses the clinician’s belief that conflict repair is the initial issue that needs to be addressed in therapy before relationship maintenance. In reality, these professional counselors seemed to actually be encouraging the use of relationship maintenance in response to conflict repair by encouraging their clients to engage in open communication and actively display assurance through preparation of dates and time spent together, revealing that there is a significant overlap between the practice of conflict repair and relationship maintenance strategies. The term “overlap” refers to interchangeable terminology used in the clinician’s perception of conflict repair, their recommendations given to repair said conflict, and the definitions of researched relationship maintenance strategies. When asked, “How do you recommend couples practice openness in their relationship?” Participant B said, “I don’t because what happens is in counseling…it’s what they experience in the session when they take that risk” and then later gives an example of what he says to a client’s partner:

‘Can you tell him that it’s scary to tell him, how vulnerable that is for you?’ And the couples inevitably take it home with them once they’ve had a positive experience with it, they want to do it more. So I don’t say ‘Do that more’ per say because they’ve done it in the session they kind of end up doing it, but you have to build up that relational trust…trust that I can be open and transparent with you and you won’t betray that trust. Here Participant B holds the belief that they do not actively recommend couples practice openness in a relationship during therapy, when in reality, the participant’s encouragement of being vulnerable and building up trust within the relationship is explicitly using the relationship maintenance strategy openness in their treatment of romantic couples. In addition, the participant notes that their recommendation to approaching risk in the face of conflict is “the deeper conversations, not the little surface ones…it’s about having the difficult conversations despite
the risk for disconnection and conflict.” Furthermore, Participant C was asked how relationship maintenance was an important part of working with couples, to which they responded, “One couple I work with really just needed to make time to check in with each other every day...They have two kids, they work full time, and they thought that was providing for their relationship and for their family, and so they needed to make space to do that.” The participant then went on to say how that was secondary to their main focus in treatment. By using the terms “check in with each other every day” and “make space to do that” Participant C was advocating that the couple use the relationship maintenance strategy of assurances. Participant D referred to a conflict they see particularly in men, “to stop the fight so it doesn’t get worse and so that we can recover and be okay” which can be viewed as an effort to maintain positivity in the relationship, or avoiding criticism even when difficult (Canary et al., 2002). In response to that, Participant D does some educational training to help couples understand and explain their emotions to each other. For instance, they suggest giving the emotion a color, “It’s yellow, so what does yellow mean, what feeling is yellow? ‘Oh, that’s when I’m feeling really insecure or just upset at myself.’” Here, Participant D is actively recommending these clients practice openness by encouraging them to share their thoughts and feelings, and even going so far as to teach them how to do it.

Additionally, each of the participants mentioned a particular model of therapy that focused on the process of building strong emotional connections between partners in contrast to teaching strategies that would assist the couple during conflict. In reference to this therapy model, it became evident that participants’ use of treatment interventions from this perspective closely aligned with relationship maintenance strategies. Some of the treatment techniques in their preferred model of therapy addressed early relationship experiences and behavior in later relationships, which coded closely with the relationship maintenance strategy: assurances. This
was an important result because it supports the finding that clinicians encourage the use of maintenance strategies in treatment, specifically when discussing a client’s behavioral responses in their romantic relationship due to early influences. For example, Participant D explained:

I think we all have different experiences growing up so we get different templates and models of how to be in a relationship and how to get our needs met, so if you’re thinking attachment theory, attachment theory is how do we get our needs met, especially as a little kid. Can I count on people or not?...So it’s just based on what we experience at a very young age, we start to make our own conclusions on what’s safe and what’s not.

The explanation given by Participant D closely relates to the definition of *assurances* given by Stafford and Canary: behaviors expressing love and commitment to convince the other person of their level of investment in the relationship (Canary et al., 2002). A partner’s ability to assure their partner and be assured by their partner of their commitment and trust in the foundation of the relationship can likely be traced back to their experiences with attachment figures at a young age. Additionally, Participant B similarly noted, “I think the reason [one form of couples therapy] works well is because it ultimately relies on attachment theory, which is really standard across all relationships...the research on how fundamental [it is] having an important trusting, safe other in our world...”. This further supports the claim that functioning relationships require a trustworthy partner, and in order to feel that trust, the partner needs to be reassured of it; again, this notion has similarities to the concept of *assurances* and adds increased support to our finding that treatment approaches overlapped with maintenance strategies for our participants.

Ultimately, there was an overwhelming amount of terminology that overlapped with the clinician’s explanation of conflict repair and what can be identified as a relationship maintenance strategy. Professional counselors are likely to encourage their clients to engage in relationship
maintenance strategies, especially in response to conflict; however, they view these recommendations as conflict repair strategies within their preferred theoretical framework of clinical practice rather than as “relationship maintenance.” In reality, there is considerable overlap between what professional counselors seem to perceive as conflict repair strategies used in their treatment of couples and their recommendations featuring terminology encompassing relationship maintenance strategies. Additionally, each of these clinicians mentioned the importance of their particular treatment framework that included some intervention techniques closely aligned with relationship maintenance strategies. Therefore, it is likely that the participants’ perception of their own use of these strategies is more interchangeable with concepts of their chosen theoretical framework than they realize or explicitly state.

**Influence of relationship patterns on integration of relationship maintenance**

Every participant described common relationship patterns and dynamics during their interviews. Often, as they described these dynamics, which included aspects and key terminology of relationship maintenance, it became apparent that relationship maintenance concepts were embedded in these clinical vignettes. For example, each participant described the same common relationship dynamic at one point in their respective interviews, which is known as a “pursue/withdraw” pattern: within a heterosexual couple relationship, female and male behavior frequently unfolds as one partner pursues the relationship in times of conflict, and one withdraws from the relationship during conflict. The explanations of these behaviors closely overlapped with aspects of relationship maintenance, or a lack thereof. When discussing general behaviors of women, Participant B explained, “You don’t realize when you’re being critical of him because you want him closer because you don’t know how else to get him to turn towards you, to look at you, to engage with you, you’re being critical.” This participant described a
hypothetical example in which a female partner’s pursuing efforts could be seen as her bid for **assurance** from her partner. In response to this kind of bid, Participant D would advise, “Helping them just know that their partner’s gonna be there for them so they don’t have to get so big and show up like that…and then the pursuer is going to feel heard and understood and connected with.” Here Participant D is advocating for one partner to show **assurances** to the other partner, which could reduce the need for the other to pursue the relationship in unhealthy ways.

When participants described withdrawing behaviors common in couple relationships, typically demonstrated by male partners, they further supported the idea that this common relationship pattern (withdrawing) aligns with a specific relationship maintenance strategies. Participant C explained: “Men are much more the homeostasis providers so they’re not going to try to make things better because they’re also risking making things worse…I think it’s a gift, it’s probably useful in a lot of ways…they’re just not as pro ‘let’s keep close.’” This a significant example of how one partner may try to maintain **positivity** in the relationship by avoiding issues or communication with their partner in order to keep things from getting worse. For Participant C, working with their client to “keep close” advocates for **openness** because “Men miss out a lot because they’ve been taught to keep quiet. So, for men it’s about teaching them to communicate explicitly.” Participant A supported this comment by saying, “For them to maintain, they have to reach out in some way.” The consistency of the participant’s responses to these typical male and female behaviors revealed a presence of relationship maintenance strategies embedded in the theoretical framework they use in their counseling methods.

When responding to these behaviors in treatment, participants noted their focus of “process over content” when addressing things being conveyed in the therapy session. In other words, therapists focused on **how** things were being said rather than **what** was being said between
partners. For example, Participant C noted, “It’s not about what they’re doing because often times they’re trying their best, it’s about how they’re asking for it or demanding it that’s usually getting in the way…so this kind of goes back to a lot of communication.” With the implementation of relationship maintenance, perhaps the process could be adjusted in order to enhance the way the partners communicate. Participant D’s experience supported this as well: “People have all sorts of flavors…if that’s what you’re really needing then how can you communicate that to your partner? I think just being open to exploring that…” The participant’s recommendation of using openness in order to assist the partner in the process of how they communicate their wants and needs to their partner is a notable example of how typical patterns addressed in treatment of relationships can be associated with relationship maintenance. That is, relationship maintenance can affect the relationship pattern, how the partner pursues, or the process in which they pursue, and the relationship pattern can be affected by relationship maintenance in terms of treatment and healing.

**Willingness to apply and broad applicability of relationship maintenance**

The final theme that became apparent from the collected data was how each of the participants voiced a willingness and even a desire to apply relationship maintenance strategies in their treatment of romantic couples, whether it be alongside conflict repair strategies as therapy began or after couples had progressed significantly through treatment and had built healthier relationships. Each of the participants stressed the importance of relationship maintenance and its implementation in treatment of couples, they just prioritized conflict repair in their clinical work. Participant C emphasized:

I wish more people knew more how to maintain their relationship and went more to couples counseling to learn how to do it and get guidance and experience with a
counselor…we need to get more information out there to the public about it and normalize it….

Similarly, Participant D advocated for relationship maintenance by advising:

If you’re not maintaining, to me it would say that you’re not attending to the relationship…or you’re not totally invest in the relationship, so I can see how that might cause some conflict…I guess what I talk to my couples about is, as we continue to grow as individuals and human beings, we need to be able to adjust instead of stay rigid and that means in our relationships. So, we need to keep up on that and maintain it.

Participant A made the interesting point while discussing the important of relationship maintenance, “If you’re able to stay connected, you can support each other as you change, and you won’t feel isolated, or lonely, or neglect, and it’s much easier to find repair in the relationship.” Participant B supported a particular model of therapy while simultaneously endorsing relationship maintenance by saying:

“Data shows us that these behaviors and these actions are good for relationships and couples who have been together for a long time and they’re healthy and happy have done these things, but we also have Sue Johnson’s data that shows that if there’s no real engagement…these tasks can be experienced as superficial level sort of relationship behaviors.

So, while these clinicians may very well focus on repairing conflict in their treatment of couples, there was overwhelming evidence of support for implementing relationship maintenance strategies in treatment, why the education of maintenance can serve as potential strategies to preventing conflict, and ultimately the overall importance of relationship maintenance in romantic relationships.
Discussion

The overall purpose of this study was to gather data from licensed professional clinicians based on their experiences treating couples in order to identify whether or not they used researched relationship maintenance strategies in their treatment of said couples. In an effort to understand the link between professional knowledge of these concepts and how they actually integrate into their clinical approaches, data was gathered from each of these professionals, three of which were currently practicing, which resulted in emerging themes that encompassed their unique experiences with treating a variety of couples.

Research conducted by Stafford and Canary (2002) revealed five main strategies that made up the concept of relationship maintenance: positivity, assurances, openness, sharing tasks, and social networks, which served as the theoretical framework for this study. The mention of positivity refers to behaviors that maintained an optimistic point of view, even in difficult scenarios (Canary et al., 2002). Assurances may be explained as behaviors that exhibit commitment in order to be a reliable figure for the other partner (Canary et al., 2002). Openness includes the discussion of the relationship with the freedom to share one’s thoughts and feelings (Canary et al., 2002). Sharing tasks was defined as the equal division of chores or work between partners (Canary et al., 2002). Finally, social networks were explained as those that serve as an important outlet or confidant for each partner (Canary et al., 2002). While there was little research to be found about the explicit use of these strategies as treatment methods in couples’ therapy, we believed that clinician’s treatment of romantic couples would feature discussion that included concepts or terminology closely aligning with these researched strategies.

After analysis of interviews was completed, the emerging themes became evident amongst the data that served as sufficient evidence in answering the research question: how are
professional counselors using researched relationship maintenance strategies in their treatment of romantic couples? These themes included the following: 1) clinician’s perceived gap between relationship maintenance and repair, 2) overlap of repair and maintenance, 3) Relationship patterns influence integration of relationship maintenance, and 4) willingness to apply and broad applicability of relationship maintenance, collectively aligned with Stafford and Canary’s (2002) findings on relationship maintenance strategies in romantic couples. In other words, the explanations given by the participants regarding their preferred treatment methods of couples in therapy reinforced literature within the field in terms of their similar use of terminology and aligning concepts. Specifically, the three most common maintenance strategies that aligned with the participant’s discussion of their treatment experiences included concepts of openness, assurances, and positivity. The strategies sharing tasks and social networks were mentioned less frequently in regard to their overlap with assisting in conflict repair, which seemed to be the main focus in therapy amongst each of the participants.

One finding of particular interest was that each participant mentioned of the importance of implementing the use of relationship maintenance education in their treatment of romantic couples, whilst vocalizing that they were not currently doing so in their practice. While participants were not explicitly advocating for the use of specific relationship maintenance strategies, evidence showed that their manners of addressing couples and providing treatment aligned very closely with said strategies. For instance, Participant C explained, “When I work with [couples] I use [preferred therapy model] and that’s more aimed at creating security and safety in a relationship.” As mentioned, the strategy assurances is ultimately about supplying your partner with that safe and secure feeling, which Participant C noted was specifically part of a chosen method of therapy explicitly addressed, therefore, perhaps clinicians are unaware of the
similarity of their preferred theoretical frameworks in therapy, and relationship maintenance strategies.

Strengths and Limitations

Due to each interview having been conducted solely by the primary investigator, a small sample size of four participants were used for this study in the interest of time constraints. However, the participants came from different backgrounds, therefore provided different narratives within each interview that expounded on their personal experiences working with couples and treating them in a therapy setting. Each participant was married, so they were able to refer to their own relationships in some instances, providing insight to their view of relationship maintenance in terms of their personal experiences. One participant was not currently practicing, so that allowed for some variability in recollection of treatment experiences in contrast to other participants who may have worked with a client the day prior to the interview. Each of the participants was a Licensed Marriage and Family Therapist (MFT), so a significant amount of discussion regarding each of the themes was similar across each interview, which supports the consistency amongst the frameworks involved in this particular field.

Some of the strengths of this study also doubled as limitations. For instance, because all of the participants were MFTs, it is possible that therapists with other training backgrounds may have provided different data about this topic. Additionally, had we included a participant that was not married in our sample, analysis could have provided further insight different to the personal experiences mentioned by each of the participants, which again, were married. As previously mentioned, limitations for this study included a small sample size of participants, which in turn, makes generalizing the identified results difficult to a broad population of clinical professionals. Perhaps if this study was geared at an audience more focused on the
implementation of relationship maintenance strategies, such as relationship educators, the responses regarding the use of these strategies would look much differently. In fact, it may be beneficial to conduct a similar study from a couple’s perspective to identify how romantic partners perceive their counselor’s implementation of relationship maintenance strategies in therapy. Ultimately, more participants, more time, and perhaps gearing this study towards a different audience could have yielded different, richer results.

**Implications**

We direct some important implications toward therapists, couples, and researchers. First, we encourage couple’s therapists to use relationship maintenance strategies more intentionally when treating couples. As all of our participants reported, they are already doing so; however, our results indicated that they did not conceptualize these strategies as “relationship maintenance.” Therapists would benefit from education about how relationship maintenance strategies may be used as a foundation for their clinical work with couples. Using a framework similar to that of a relationship educator who focuses on preventive—rather than intervention—strategies, clinicians can both educate and treat their couples simultaneously. Additionally, explicitly implementing these strategies in their treatment alongside conflict-specific interventions, clinicians may create a conflict “buffer”, in order to prevent the repetition of said conflict, and ultimately, educate clients of these strategies before conflict is repaired and treatment is terminated.

For couples, implications include seeking out non-clinical relationship enhancement strategies; couples may benefit from understanding how relationship maintenance strategies may often be the focus of relationship enrichment books, programs, and classes. As our participants noted, relationship maintenance is intended to be preventive in nature; thus, if couples
intentionally integrate strategies from relationship-maintenance-based enrichment programs or books into their relationships, perhaps they would be less likely to need therapy focused on resolving conflict or relationship dysfunction in the future. Additionally, couples may benefit from our findings by recognizing that different treatment professionals are more focused on repair than maintenance. This is important for couples to know so that they can actively select relationship professionals that closely align with their perceived needs.

It is also recommended that researchers continue to gather more data directly from couples, serving as unbiased and unprofessional perspectives, in order to see how relationship maintenance constructs are involved in treatment depending on the treatment approach and interventions being used by the clinician. With a better understanding of what the presence of maintenance strategies look like in the treatment process, it will allow for the expansion of various treatment methods to begin the implementation of maintenance strategies if they are not already. In other words, more research from a couples perspective will allow for an unbiased view of various treatment methods, which can lead to the expanding of these theories being practiced by clinicians.

**Conclusion**

It would appear that professional counselors are not using research relationship maintenance strategies in their methods of treatment for romantic couples due to minimal research on the topic. The purpose of this study was to identify whether or not that was true by interviewing licensed professional counselors about their experiences working with clients and analyzing their responses to identify overlapping themes between participant responses that focus on their clinical practice and subsequent integration of relationship maintenance strategies in their treatment approaches.
The results of our study identified four main themes from analysis of interview transcriptions. These themes include: 1) clinician’s perceived gap between relationship maintenance and repair, 2) overlap of repair and maintenance, 3) Relationship patterns influence integration of relationship maintenance, and 4) willingness to apply and broad applicability of relationship maintenance. Each one of these findings provided insight of the considerable overlap not only of clinician’s perception of conflict repair and maintenance, but also the willingness of clinicians to apply relationship maintenance in their methods of treatment due to its broad applicability to their methods of treatment and capabilities of conflict prevention. The findings of this study contribute to the field of couple’s therapy by highlighting the ways in which clinicians incorporate relationship-based research into their practice.
References


