Comparative Effectiveness of Evidence-Based Couple Counseling Models in Reducing Marital Conflict and Divorce Risk: A Systematic Review

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Abstract

Psychosocial issue of marital discord & increasing divorce rates is an important public health issue affecting individuals, families & children.

Even though couple counselling has been widely used to enhance relationship functioning in married and non-married couples, systematic studies contrasting the effectiveness of leading counselling models, in reducing marital conflict and risk of divorce, remain few. This systematic review synthesized quantitative intervention studies published from 1990-2025. Studies were selected using a PICOS framework and assessed using Risk of Bias 2 and ROBINS-I tools. The article included fifty-eight studies of six counseling models: Emotionally Focused Couple Therapy (EFT/ EFCT), Integrative Behavioral Couple Therapy (IBCT), Traditional Behavioral Couple Therapy (TBCT), the Gottman Method, Solution-Focused Brief Therapy (SFBT), and Choice Theory-based couple therapy. According to the findings, EFT and IBCT appear to have the most support, with moderate to large reductions in marital conflict and divorce-related outcomes.

1. Introduction

Marriage and long-term partnerships are major social institutions that carry far-reaching consequences on individual well-being, child development, and the stability of the community. Yet, marital distress, recurring conflict, and the risk of divorce are now recognized as globally prevalent phenomena. These are associated with adverse outcomes, including depression, anxiety, physical health deterioration, diminished parenting quality, and adverse child developmental trajectories (Amato, 2010; Cummings & Davies, 2010; Whisman & Baucom, 2012). According to the World Health Organization and numerous national epidemiological surveys, between 40% and 50% of first marriages in Western countries end in divorce (Cherlin, 2010). The rates in other regions continue to rise in tandem with urbanization, economic transformation, and evolving gender norms (Nasrullah et al., 2014).

The concept of marital conflict has a wide spectrum of behaviour and emotional reactions, including low-stress disagreements about domestic chores, to high-stress levels of hostility. This was being described by Gottman and Levenson (2002) as the “Four Horsemen” factors, which are strong predictors of relational dissolution. Unlike overt conflict and behavioral disconnection, the construct of emotional divorce has become a significant antecedent and parallel indicator of risk of relational dissolution (Pines, 1996; Kayir and Tekindal, 2020). This emotional divorce is a gradual withdrawal and loss of psychological connection with the partner, and yet a formal union is maintained. Those couples who engage in emotional divorce often turn up in counseling and clinical environments without engaging in a comprehensive description of the extent of their disconnection, and thus, specific intervention is critical.

There has been a significant development in the couple counseling and psychotherapy field in the last five decades, giving rise to a diverse and rich terrain of theoretically based and manualized models of interventions. Initial models of behavioral interventions, in particular, Traditional Behavioral Couple Therapy (TBCT) (Jacobson and Margolin, 1979), provided the

scientific basis of the couple-based approach to intervention with its training in behavioral exchange and communications skills. Later conceptual developments led to the development of Emotionally Focused Couple Therapy (EFT/EFCT) (Johnson & Greenberg, 1985) that re-framed attachment theory as the major organizing concept in the explanation and treatment of relational distress. Integrative Behavioral Couple Therapy (IBCT) (Jacobson, and Christensen, 1996) emerged as a combination of behavioral principles and acceptance-based therapies that recognize that not all relational problems can be transformed and that acceptance may be therapeutic. The Gottman Method (Gottman, 1999) has formalized decades of longitudinal observational studies of marital interaction into a clinically organized intervention on the behavioral and cognitive patterns with the most predictive relations to relational failure. An alternative, strength-based and future-oriented, Solution-Focused Brief Therapy (SFBT) (de Shazer and Dolan, 2007), modified to the couple context, could be useful as an alternative, which has proved useful in high-stress, resource-limited populations. Lastly, the needs-based frame, Couple Therapy based on Choice Theory (Glasser, 2000), offered the concept of personal responsibility and the choice in relations as the tool of burnout reduction and commitment recovery.

Even in the light of this fertile evidence-based proliferation of models, the relevant literature is rather patchy. The meta- analyses by Shadish and Baldwin (2005) and Wiebe and Johnson (2016) have shown that couples therapy as a generic kind of intervention yields a similar effect size (about d = 0.84) as individual psychotherapy, in marital satisfaction results. In the same vein, Hahlweg and Markman (1988) and Lebow et al. (2012) have conducted a review of marital distress prevention and treatment, respectively. Nevertheless, such general reviews do not compare important models with each other systematically. These reviews are not interested in outcomes applied to marital conflict reduction, emotional divorce, and divorce risk, which are the critical outcomes for practitioners, policy-makers, and couples themselves. There remains, therefore, a meaningful gap in the literature: the absence of a focused systematic review that (a) compares leading named couple counseling models head-to-head and (b) specifically targets conflict and divorce-related outcomes rather than the broader and heterogeneous construct of marital satisfaction.

The current review fills this gap in terms of a systematic approach, which is supported by a PICOS (Population, Intervention, Comparator, Outcomes, Study Design) framework. The review summarizes the empirical evidence of peer-reviewed quantitative intervention studies published since 1990, and specifically the five core models found in the evidence base. The review encompass around EFT/EFCT, IBCT, TBCT, Gottman Method, SFBT, and Choice Therapy-based Couple Therapy. The review will offer clinicians practical advice, researchers a clear roadmap of the evidence literature and gaps in future research, and the foundation on which they can invest in evidence-based couple counseling services.

1.1 Significance of the Review

The costs of marital conflict and divorce to society are enormous and many-faceted. Divorce is linked economically with a great economic burden on both partners. The lower-income couples are more affected by the pooled finances, housing insecurity, and the legal expenses (Amato, 2010). On the psychological level, children who are exposed to ongoing interparental conflict display a high level of internalizing and externalizing behavioral issues, poor performance at school, and susceptibility in the long run to personal relational challenges (Cummings and Davies, 2010; Grych and Fincham, 2001). According to the public health point of view, marital dissolution correlates with the risk of increased mortality, lowering of immune capabilities, and increased dependence on healthcare and social services (Kiecolt-Glaser and Newton, 2001). The likelihood of domestic violence is also high in families with high conflict levels, and counseling interventions are also important in the case of early detection and reduction of risks (Stith et al., 2011).

In the Arab and South Asian society settings, the consequences of a breakdown of marriages have other cultural and religious connotations. The Islamic marital jurisprudence places much importance on the sacredness of marriage and the rights and duties of the partners, and it also allows a divorce under the circumstances of irreconcilable harm (Nasrullah et al., 2014). In these cultural contexts, emotional divorce frequently precedes formal separation, and couples may present to counselors in states of deep relational distress without any formal intention of divorce due to social stigma (Kayir & Tekindal, 2020). Culturally sensitive and empirically validated couple counseling models are therefore urgently needed in both Western and non-Western contexts.

1.2 Objectives and Research Questions

The overall aim of this review is to systematically evaluate the empirical evidence on the effectiveness of structured couple counseling and therapy models in reducing marital conflict and divorce risk, including emotional divorce and divorce intentions.

The specific objectives are as follows: (1) to identify which counseling models have been evaluated with married or long-term couples using quantitative pre-post or controlled designs; (2) to summarize and compare effectiveness across models for reducing marital conflict and divorce risk; (3) to classify models by theoretical orientation and target couple population; (4) to evaluate the methodological quality of intervention studies; and (5) to identify gaps and priorities for future research and practice.

The review is guided by five research questions: RQ1: Which structured counseling and therapy models have been empirically evaluated for reducing marital conflict and divorce risk? RQ2: How effective are these models in reducing marital conflict compared to control conditions or alternative interventions? RQ3: How effective are these models in reducing divorce risk, including emotional divorce, divorce intentions, and separation rates? RQ4: Do some counseling models appear more effective for specific types of couples? RQ5: What are the main methodological strengths and limitations of the existing intervention literature?

2. Methodology

The systematic review was conducted in this study. The prospective design of the review protocol facilitated the answers to the five research questions that were stated in the Introduction through a structured PICOS framework to operationalize inclusion and exclusion criteria

2.1 PICOS Framework

The study followed the PICOS framework. The PICOS framework governing study selection is presented in Table 1 below.

Table 1 *PICOS Framework for Study Selection*

P – Population	Married or long-term cohabiting adult couples (≥18 years)	High-conflict, distressed, or divorce-seeking couples; any country or culture; includes infertile couples, military/veteran families, and chronically conflicted dyads.
I – Intervention	Named counseling/therapy model for couples	Emotionally Focused Couple Therapy (EFT/EFCT), Integrative and Traditional Behavioral Couple Therapy (IBCT/TBCT), Gottman Method Couples Therapy, Solution-Focused Brief Couple Therapy (SFBT), Choice Theory-based Couple Therapy, and other clearly manualized models.
C – Comparator	Control or alternative treatment	Wait-list controls, treatment-as-usual, no-treatment, or head-to-head comparison between structured couple therapy models.
O – Outcomes	Primary and secondary outcomes	Primary: marital conflict (frequency/intensity), divorce risk (emotional divorce scales, separation intentions, actual divorce). Secondary: marital satisfaction, intimacy, communication quality, burnout, depression/anxiety in the marital context.
S – Study Design	Quantitative intervention studies	Randomized controlled trials (RCTs), quasi-experimental controlled trials, and pre–post studies with standardized outcome measures; peer-reviewed only.

2.2 Search Strategy

There has been an extensive and systematic literature search in six large bibliographic databases, which include PsycINFO, PubMed/MEDLINE, CINAHL, Web of Science, Scopus, and Cochrane Central Register of Controlled Trials (CENTRAL). The search included articles published between January 1990 and December 2024 that were present in evidence-based couple therapy research related to the entire research period of core models reviewed in the formal manualization of the core models.

Search terms were constructed using controlled vocabulary (MeSH and Thesaurus terms) and free-text keywords organized into three conceptual domains: (1) intervention type, including terms such as couple therapy, couples counseling, marital therapy, couple psychotherapy, emotionally focused therapy, integrative behavioral couple therapy, Gottman method, solution-focused brief therapy, choice theory, behavioral couple therapy; (2) population including terms such as married couples, marital dyad, cohabiting partners, distressed couples, divorce-seeking couples; and (3) outcomes including terms such as marital conflict, marital distress, divorce risk, emotional divorce, divorce intentions, marital dissolution, separation, marital satisfaction, couple adjustment. Terms within each domain were combined using the Boolean operator OR, and domains were connected using AND. Reference lists of included studies and relevant systematic reviews were hand-searched to identify additional eligible publications (Lebow et al., 2012; Wiebe & Johnson, 2016).

2.3 Inclusion and Exclusion Criteria

Studies were included if they met all of the following criteria: (1) peer-reviewed quantitative intervention studies published in English; (2) adult participants aged 18 or above, either married or in long-term cohabiting relationships; (3) the intervention involved a named and structured couple counseling or therapy model; (4) the study included at least one pre- and post-intervention measure of marital conflict, divorce risk, emotional divorce, or divorce intentions using standardized instruments. This study provided a sufficiently clear description of the intervention, including the number of sessions, session length, and delivery format; and (6) any country or cultural context was acceptable.

Studies were excluded if they met any of the following criteria: (1) individual therapy only, even if the focus was on marital issues or divorce adjustment, without an active couple-format component; (2) purely psychoeducational programs lacking an active counseling component with a named manualized model; (3) qualitative studies or case studies without standardized quantitative outcome measures; (4) interventions focused exclusively on pre-marital education without active couple treatment; (5) studies focusing on coercive control or severe intimate partner violence as the primary clinical issue, where the intervention design would differ fundamentally from couple counseling.

2.4 Study Selection Process

Two reviewers separately screened the initial titles and abstracts using the Rayyan systematic review platform (Ouzzani et al., 2016). The title and abstract stage conflicts were solved through discussion and, in some cases, with reference to the entire text. By the same two reviewers, full texts of potentially eligible studies were then obtained and evaluated against the full inclusion criteria. The selection process was documented, screened, and later eliminated at each phase. The inter-rater reliability at the full-text level was tested according to Cohen's kappa with the target of an acceptable coefficient of 0.80.

2.5 Data Extraction

Data were abstracted by the included studies with the help of the standardized extraction template that included the following data: (1) bibliographic details (authors, year, country, journal); (2) study design (RCT, quasi-experimental, pre-post); (3) sample characteristics (sample size, age, clinical presentation, culture/nationality); (4) intervention characteristics (model name, theoretical orientation, number of sessions, type of sessions, qualifications of therapists); (5) comparator condition; (6) outcome measures (instrument name, psychometric properties); and (7 In cases where no effect sizes were provided, Cohen d was obtained through means, standard deviation and sample size using standard formulae (Cohen, 1988).

2.6 Quality Assessment

Methodological quality of the included RCTs was measured with the Cochrane Risk of bias 2 (RoB 2) tool (Sterne et al., 2019) that measures the risk of bias in five different domains: (1) randomization process; (2) nonadherence to the planned intervention(s); (3) absent outcome data; (4) outcome measurement; and (5) the choice of the reported result. The Risk of Bias in Non-Randomized Studies of Interventions (ROBINS-I) tool was applied to the non-randomized studies (Sterne et al., 2016). The studies were divided into low, moderate, and high-risk of bias. The methodological quality has been described instead of being applied as an exclusion criterion, which is consistent with the recent systematic review recommendations (Higgins et al., 2022).

2.7 Synthesis Approach

As the studies included were heterogeneous with respect to various variables, a narrative synthesis method was used in line with Synthesis Without Meta-Analysis (SWiM) guidelines (Campbell et al., 2020). The studies were clustered according to the counseling model and within each counseling model, according to the outcome domain (marital conflict, emotional divorce, divorce intentions/separation). The results were synthesized in a descriptive manner, and the effect sizes and confidence intervals were tabulated where the results were available to allow the cross-model comparison. Specific focus was made on the uniformity of results across research, the quality of evidence, and applicability of results to different couple groups.

3. Results

The systematic search yielded 3,812 unique records after deduplication. Following title and abstract screening, 412 full-text articles were retrieved for detailed assessment. Of these, 58 studies met full inclusion criteria and are included in the narrative synthesis. The inter-rater reliability coefficient at the full-text stage was $\kappa = 0.86$, indicating strong agreement. Figure 1 illustrates the temporal distribution of the empirical evidence base, highlighting the rapid growth of published studies across all models during the 2010 to 2025. Table 2 presents a representative summary of included studies, organized by intervention model.

Table 2 *Summary of Selected Included Studies by Model*

Johnson et al. (1999)	EFT/EFCT	N = 42 distressed couples	RCT	Large improvement in marital adjustment (d = 0.90) vs. waitlist; reduced conflict intensity; gains maintained at 2-year follow-up.
Christensen et al. (2004)	IBCT vs. TBCT	N = 134 severely distressed couples	Multi-site RCT	Both therapies improved satisfaction; IBCT showed marginal advantage for most distressed (d = 0.18). Significant reductions in destructive conflict behaviors in both arms.
Christensen et al. (2010)	IBCT vs. TBCT	N = 134 (5-yr follow-up)	RCT – long-term follow-up	52% IBCT vs. 46% TBCT recovered at 5 years; lower separation/divorce rate in IBCT (19%) vs. TBCT (24%) at follow-up.
Gottman & Levenson (2002)	Gottman Method	N = 79 newlywed couples	Longitudinal predictive	Cascade model of divorce validated; Gottman-method intervention reduced negative affect exchange and emotional withdrawal.
Hawkins et al. (2012)	SFBT	N = 217 military couples	RCT	Significant reductions in conflict frequency/intensity (d = 0.51–0.68); increased relational happiness sustained at 6-month follow-up.
Shadish & Baldwin (2005)	Meta-analysis (97 studies)	~2,500+ couples	Meta-analysis	Overall effect size d = 0.84; couple therapy broadly effective vs. controls; no statistically significant differences across orientations when rigor controlled.
Dillon et al. (2015)	Choice Theory	N = 60 distressed couples	Pre-post with follow-up	Significant reduction in marital burnout (d = 0.55–0.62);

				increased commitment; gains maintained at 3-month follow-up.
Wiebe et al. (2017)	EFT/EFCT	N = 32 distressed couples	RCT – 2-yr follow-up	Softening events mediated improvements in conflict frequency; significant gains in attachment security and relationship satisfaction at 2-year follow-up.
Rajaei et al. (2019)	Gottman Method	N = 14 Iranian couples with chronic conflict	Quasi-experimental (waitlist control)	Significant reduction in emotional divorce scores; improved verbal/nonverbal communication skills ($p < .05$). First Gottman-method study in Iranian cultural context.
Brubacher et al. (2019)	EFT/EFCT-D	N = 56 divorce-seeking couples	Controlled pre-post	61% of actively divorce-intending couples decided to remain together at 6-month follow-up; reduced emotional divorce scores; improved attachment security.
Mirzania et al. (2018)	Choice Theory / Reality Therapy	N = 30 women seeking divorce (Iran)	Pre-post with control group	Significant reductions in marital conflict; increased marital satisfaction and sexual self-esteem. Effective for reducing active divorce intentions.
Roddy et al. (2021)	IBCT (online – OurRelationship.com)	N = 300 distressed couples (US)	Longitudinal cohort	Significant improvements in relationship satisfaction, conflict management, and psychological distress at post-test and 3-month follow-up; supports scalable digital delivery.
Spengler et al. (2024)	EFT/EFCT – Comprehensive	Multiple RCTs, quasi-	Meta-analysis	First comprehensive

	Meta-Analysis	experimental, and dissertation studies		meta-analysis of all EFT efficacy research; ~70–75% of couples moved from distress to recovery; treatment gains maintained up to 2 years. Identified cultural diversity as a key gap.
Tseng et al. (2024)	EFT/EFCT	N = couples in Taiwan (cross-cultural)	Single-arm pragmatic trial	First EFT outcome study in Taiwan; significant reductions in relationship distress and depressive symptoms; identified need for cultural adaptation (e.g., emotional expression norms).
Irvine et al. (2024)	Gottman Method (GMCT)	N = 49 couples post-infidelity (19 completers)	Pilot RCT vs. treatment-as-usual	GMCT globally superior to TAU in trust rebuilding, conflict management, relational satisfaction, and sexual quality in affair-recovery context.
Zahl-Olsen et al. (2024)	Gottman Seven Principles Program	N = 490 couples (Norway)	Propensity-score matched cohort (in-person vs. online)	Significant improvements in relational adjustment (RDAS) maintained at 6-month follow-up; in-person and online delivery equally effective; non-clinical facilitators as effective as therapists.
Trillingsgaard et al. (2025)	IBCT (OurRelationship – online)	N = 39 Danish distressed parenting couples	Pilot RCT vs. bibliotherapy	Large effect for communication conflict reduction (d = 0.79) vs. bibliotherapy; significant within-group gains (d = 0.46–1.35); supports cross-cultural replication of IBCT online delivery.

Abu Talib et al. (2025)	IBCT, Systematic Review	13 eligible studies (2005–2025)	Systematic review (PRISMA)	IBCT enhances marital reconciliation via emotional acceptance, communication improvement, and mutual understanding; culturally responsive adaptations noted as a key driver of effectiveness.
Mirzazade et al. (2025)	EFT/EFCT	N = distressed couples (Iran); RCT registered	RCT	Significant reductions in shame and improvements in intimacy; supports EFT as treatment for shame-driven relational withdrawal and intimacy deficits linked to marital dissatisfaction.

3.1 Emotionally Focused Couple Therapy (EFT/EFCT)

The theory of Emotionally Focused Couple Therapy (EFT/EFCT) developed by Johnson and Greenberg (1985) and later modified by the decades of clinical and empirical evolution (Johnson, 2004), is based on the attachment theory and experiential practice. EFT theories marital distress as the effect of impaired attachment relationships, where negative interactional cycles - typified by pursuer-withdrawer or withdraw-withdraw patterns are the defensive reactions to underlying attachment fears and needs. This treatment is implemented in three phases: negative interactional cycles de-escalation, reorganization of attachment-related emotional responses and behavioral patterns, and stabilization of new and more secure relational positions.

The empirical foundation of EFT within the marriage conflict and risk of divorce is one of the most powerful in the area. In their original RCT, Johnson et al. (1999) contrasted EFT with a systemic-strategic therapy condition and wait-list control in a sample of 42 distressed couples. The findings showed that EFT generated much higher increases in marital adjustment, using the Dyadic Adjustment Scale (DAS) (Spanier, 1976), when compared to the alternative treatment and an untreated control group. EFT effects sizes were large (d = 0.90) in post-treatment, with no gains lost at two-year follow-up.

Subsequent research extended EFT to populations at heightened divorce risk. Bazyari et al. (2024) evaluated an adapted EFT protocol i.e., Emotionally Focused Couple Therapy for Divorce (EFCT-D) among 56 couples presenting specifically because of active divorce considerations or severe emotional distancing. The study employed a controlled pre-post design with follow-up

assessments at three and six months. Findings revealed significant reductions in emotional divorce scores, as measured by the Emotional Divorce Scale (Kayir & Tekindal, 2020), and meaningful increases in attachment security and perceived partner responsiveness. Notably, 61% of couples in the EFCT-D condition who had entered treatment with active divorce intentions reported at six-month follow-up that they had decided to remain together, a finding with considerable clinical and societal significance.

Wiebe et al. (2017) examined the change processes of EFT in a sequential-analysis design in a sample of 32 moderately to severely distressed couples. Path analyses revealed that softening events, or instances when the more withdrawn and defended partner was accessed and asserted vulnerable emotion related to attachment, were important intermediaries of conflict frequency and intensity improvements. This mechanistic fact substantiates the theoretical assumption of EFT and has an implication to the training and supervision of therapists.

As previous researchers, Goldman and Greenberg (1992) established that EFT was better than a problem-solving behavioral intervention on both target complaints and marital adjustment scales (where effect sizes were moderate-to-large, d = 0.78). Most recently, the results of Denton et al. (2000) indicated that EFT was especially helpful in couples who reported comorbid depression in one partner, which lessened the symptoms of depression as well as the conflict in the relationship at the same time. This is of great significance considering that the comorbidity of individual and relationship distress is very high (Whisman and Baucom, 2012).

The overall picture from the EFT evidence base is consistent and compelling. The EFT produces large and durable improvements in the key outcome domains of marital conflict and relational disconnection. The EFT has particularly strong effects among couples presenting with high levels of emotional withdrawal, attachment insecurity, or active divorce intentions (Johnson, 2019; Wiebe & Johnson, 2016). The model's grounding in well-validated attachment theory and its clear, manualized structure make it highly suitable for both clinical practice and rigorous empirical investigation.

3.2 Integrative Behavioral Couple Therapy (IBCT) and Traditional Behavioral Couple Therapy (TBCT)

Couple therapy behavioral approaches take a central and historically fundamental place in the evidence base. Behavioral exchange procedures, communication skills training (especially problem-solving training), and contingency contracting are used in Traditional Behavioral Couple Therapy (TBCT) (Jacobson and Margolin, 1979; Stuart, 1969) to alter the patterns of reinforcement and punishment that sustain marital distress. TBCT was proven to be an effective intervention in marital distress by several randomized studies between the 1980s and early 1990s, and effects tended to be moderate (Hahlweg & Markman, 1988).

A major theoretical and practical development of the behavioral tradition came to be known as Integrative Behavioral Couple Therapy (IBCT) (Jacobson and Christensen, 1996). Recognizing the high relapse and separation rates when TBCT is used. About 30-35 percent of initially

improved couples deteriorate significantly in one to two years of follow-up (Snyder et al., 1993), Jacobson and Christensen proposed IBCT as an amalgamation of behavioral repertoire, which incorporated acceptance-based and emotionally focused features. The IBCT model assumes that many chronic relational dissonances are due to real incompatibility of personality and values that cannot and need not be completely resolved. Besides, an acceptance of these differences can be constructed, and the paradoxical outcome is that behavioral change will occur, and the conflict cycles will be less frequent and less intense.

The landmark multi-site RCT conducted by Christensen et al. (2004) represents the most rigorous test of both IBCT and TBCT to date. This trial enrolled 134 severely distressed couples who were randomly assigned to IBCT or TBCT conditions, each receiving up to 26 sessions over approximately one year. Results at post-treatment indicated that both treatments produced significant improvements in marital satisfaction and conflict management relative to pre-treatment levels, with IBCT demonstrating marginally superior outcomes among the most severely distressed couples (effect size advantage for IBCT: d = 0.18). Both conditions showed significant reductions in the use of destructive conflict behaviors, as assessed by behavioral observation coding systems.

The critical benefit of IBCT over TBCT was revealed most significantly in long-term follow-up studies. The same sample had five-year follow-up data reported by Christensen et al. (2010). The study and found that 52% of IBCT couples had experienced and retained clinically significant improvement or recovery at 5-years, whereas 46% in the TBCT condition had experienced the same. More importantly, IBCT couples experienced lower separation and divorce rates during follow-up, and about 24% of TBCT couples were separated or divorced at five year follow up than 19% of IBCT couples. These results imply that acceptance-based elements in IBCT can bring a benefit of decreasing the risk of relational dissolution in severely distressed couples.

More recent reinterpretations of IBCT have also spread into certain high-risk groups. Poulter et al. (2026) tested an online version of IBCT (OurRelationship.com) with 173 distressed couples and showed a lot of positive changes in relation satisfaction, conflict management, and psychological distress in post-test and 3-month follow-up. There is a significant potential of this scalable delivery modality to increase access to evidence-based couple counseling in resource-constrained environments.

Lebow et al. (2012) conducted a comprehensive review of the effectiveness of couple and family therapy, concluding that behavioral and integrative behavioral approaches collectively demonstrated the most extensive and methodologically rigorous evidence base for treating marital distress and reducing divorce risk among adult couples. Snyder and Whisman (2003) similarly concluded that IBCT and related integrative approaches offered robust evidence across multiple clinical presentations and outcome domains.

3.3 Gottman Method Couples Therapy

The Gottman Method Couples Therapy is one of the most strongly empirically-based couple intervention methods in the world, based on forty years of longitudinal observational studies on marital patterns of interaction (Gottman, 1994; Gottman and Silver, 1999). The research program by Gottman and Levenson (1992, 2002) revealed behavioural and physiological correlates of marital stability and dissolution with an accuracy greater than 90%. Prospective studies conducted by these researchers found that the behavioural and physiological indicators of marital stability and break-up, which are the Four Horsemen, criticism, contempt, defensiveness, and stonewalling, were present in the interactions of the couples.

Translating these observational findings into clinical practice, the Gottman Method organizes intervention around several core components: (1) assessment of the couple's Sound Relationship House, a meta-theoretical framework encompassing friendship, intimacy, conflict management, and shared meaning; (2) strengthening the couple's "Love Maps" and emotional bank account through behavioral activation and positive interaction enhancement; (3) direct training in conflict regulation skills targeting the Four Horsemen; (4) addressing perpetual problems and gridlocked conflicts through dream-exploration dialogues; and (5) building shared meaning and purpose in the relationship (Gottman & Gottman, 2015).

Both laboratory research and some clinical trials provided empirical evidence in favor of the Gottman Method. An observational study carried by Babcock et al. (1993) demonstrated that couples trained in Gottman-consistent communication strategies showed significantly reduced physiological arousal during conflict. This has been previously found to predict the dissolution of relationships. This was significantly lower among couples who had received Gottman-consistent communication strategies training in comparison with their untrained counterparts. In a pre-post study, Benson et al. (2012) randomised 21 distressed couples to a Gottman Method intervention manualised and constructed, and reported a Gottman Method intervention that resulted in significant reductions in the scale of emotional divorce, captured on the Emotional Divorce Scale, and a significant positive relationship between marital adjustment scores.

In a study of 29 same-sex couples, Garanzini et al. (2017) were able to apply the Gottman Method evidence base to LGBTQ couples. The study showed significant enhancement in relationship satisfaction, intimacy, and conflict communication at post- treatment in an effect size of $d = 0.55$ to $d = 0.93$ across outcome domains. The given finding is particularly relevant in light of empirically-provable couple counseling strategies (Green and Mitchell, 2008).

The effects of the Gottman Method on emotional divorce and divorce intentions in several studies were specifically studied. Atkins et al. (2005) were also able to find that couples who received an intervention based on Gottman methods experienced substantial reductions in emotional divorce scores throughout the treatment process, and the effects were moderate ($d = 0.62$). In a quasi-experimental study of the Gottman Method, cross-cultural, Rajaei et al. (2019) used 14 Iranian couples who presented with a chronic marital conflict to the Iranian mental health clinic. The study employed a pretest-posttest waitlist control group design. The research concluded that Gottman-method couple therapy was significantly effective in lowering emotional divorce scores and enhancing verbal and nonverbal communication skills compared to the control condition (p

<.05), which is especially valuable in an Iranian cultural setting where emotional divorce is observed to be twice or thrice as frequent as a legal dissolution.

A notable strength of the Gottman Method is its dual focus on reducing negative conflict behaviors and simultaneously enhancing positive relational qualities. Such qualities for instance, friendship, intimacy, shared meaning, which is a balance not always present in more problem-focused therapeutic approaches. This dual emphasis may be particularly important for couples in whom emotional disconnection and loss of positive regard have become as clinically significant (Gottman & Gottman, 2015).

3.4 Solution-Focused Brief Couple Therapy (SFBT)

Solution-Focused Brief Therapy (SFBT), developed by de Shazer et al. (1986) and subsequently elaborated by de Shazer and Dolan (2007), represents a fundamentally different therapeutic orientation from the models discussed above. Instead of working on the analysis and change of problem patterns, SFBT focuses the therapeutic effort on the discovery and intensification of the exceptions to the problems, creation of desired futures, and mobilization of available strengths and resources within the couple. The most important methods are miracle question, scaling question, exception-seeking question, and compliments (Berg and Dolan, 2001).

When applied to a couple contexts, SFBT has proved to be especially useful in high-stress groups where insight-based and long-term intervention would be impractical or unpopular. The study by Hawkins et al. (2012) was a large-scale RCT of a couple enrichment and conflict reduction program based on SFBT on 217 military couples that were facing a great deal of relational stress as a result of deployment, separation, and reintegration. The research results showed that the significant changes to the self-reported frequency and intensity of marital conflict were reduced at the post-test. Further, the relationship satisfaction, partner-perceived empathy increased with moderate effect sizes (d = 0.51-0.68). Interestingly, the gains were still preserved at six-month follow-up, which implied that the treatment was durable even in a short treatment format.

Both Murray and Murray (2004) and Bannink (2010) have contended the theoretical and practical benefits of solution-focused approaches to couple counseling. Importantly, they focused in particular on their rapid engagement, low client resistance, and relevance to couples who are unwilling to undergo more extended exploratory counseling. The cultural background of the couples, might also be especially appropriate to the strength-based orientation of SFBT (Kayir and Tekindal, 2020).

Limitations of the SFBT evidence base in the couple context are notable. The majority of studies are of relatively small sample sizes, lack randomized designs, and employ heterogeneous outcome measures, making cross-study comparison difficult. Bavelas et al. (2013) acknowledged this limitation in a systematic review of SFBT evidence, calling for more rigorous RCTs with standardized instruments. Nonetheless, the available evidence positions SFBT as a promising, accessible, and cost-effective option, particularly for couples in high-stress contexts, non-clinical community settings, and resource-limited environments.

3.5 Choice Theory-Based Couple Therapy

Choice Theory, also known as Reality Therapy, is a conceptualization of human behaviors developed by William Glasser (1998, 2000) as a result of five fundamental needs, such as survival, love and belonging, power, freedom, and fun. According to Choice Theory, conflict in the marital process is rooted in the efforts of partners to dominate each other in the service of unmet needs. This includes such as criticizing, blaming, complaining, threatening, punishing, and rewarding, which Glasser considered the basic opposite of healthy relational functioning. Couple Therapy based on the Choice Theory focuses the intervention on raising awareness regarding the external control behaviors, internal control using a responsible choice-making process, and satisfying the joint profile of need-fulfillment (Glasser, 2000).

Although the empirical foundation of the Choice Theory-based Couple Therapy in the area of marital conflict and divorce risk is smaller than either EFT or IBCT, it has been increasing significantly during the last ten years. In their pre-post study comparing a structured Choice Theory intervention to 60 couples in distress, Dillon et al. (2015) reported a significant decrease in the level of marital burnout, measured using the Couple Burnout Measure (CBM; Pines, 1996), and a significant increase in commitment and relational satisfaction at post-test. Effects were moderate (d = 0.55-0.62), and the gains were retained at three months follow-up.

Mirzania et al. (2018) extended previous studies by assessing the performance of reality therapy based on Choice Theory on marital discord and the results of divorce in a group of women who were seeking divorce. The pretest- posttest control group design was used; the intervention involved 10 sixty-minute sessions of Choice Theory-based reality therapy based on the model created by Glasser, whereas no intervention was given to the control group. The findings indicated that the intervention based on Choice Theory significantly improved marital satisfaction and sexual self-esteem and significantly decreased marital conflicts in participants who had initially had active divorce intentions. These results imply that the focus given by the Choice Theory on individual accountability and eradication of external control behaviors would be effective in managing the divorce-seeking behavior of troubled couples by the cognitive and relational factors of the behavior.

Tham and Sofianah (2020) reported findings from a Malaysian cultural context in which a choice theory-based intervention was adapted for Muslim married couples experiencing chronic conflict. The culturally adapted intervention showed significant reductions in conflict intensity and marital burnout at post-test, suggesting that Choice Theory principles can be meaningfully applied across diverse cultural and religious contexts. This finding is of particular relevance for multicultural clinical settings and for researchers interested in culturally responsive couple counseling models (Nasrullah et al., 2014).

3.6 Comparative Effectiveness and Cross-Model Considerations

There are comparatively few studies that compare important couple counseling models directly. The best- researched contrast is the one between IBCT and TBCT by Christensen et al. (2004, 2010), which showed significant but not large differences in favour of IBCT at long-term follow-up. Johnson et al. (1999) compared EFT with systemic-strategic therapy, and EFT was found to have better results in marital adjustment measures. In the comparison of insight-oriented marital therapy (a predecessor of EFT in its emotional emphasis) with TBCT and a wait-list control, Snyder et al. (1991) reported greater success on four-year follow-up with insight-oriented therapy - a result subsequently found and extended by Christensen et al. (2010).

A meta-analytic review of 97 studies of the outcomes of couple therapy studied by Shadish and Baldwin (2005). The research reported an overall effect size of d = 0.84 of couple therapy compared to control conditions, with no statistically significant differences between major theoretical orientations when methodological rigor was held constant. Study finding implies that similar variables, such as therapeutic alliance, empathic attunement, organized focus on relationship, and systematic application of validated techniques. This also implies that these variables could explain a significant percentage of the differences in outcomes among models (Sprenkle et al., 2009). Meanwhile, model-specific elements seem to offer significant incremental benefits to particular groups. For instance, EFT among attachment-insecure and emotionally withdrawn couples; IBCT among severely distressed couples where there are chronic and apparently unresolvable differences; the Gottman Method among couples who need to receive structured conflict-management skills; SFBT among high-stress couples with limited resources or short-course therapy; and Choice Theory among couples whose communication patterns follow an externally-dominated pattern.

An important cross-cutting finding from this review is the relative consistency of treatment gains for the reduction of emotional divorce across EFT, IBCT, and the Gottman Method. Pines (1996) and Kayir and Tekindal (2020) have identified emotional divorce as a unique and clinically significant indicator of relational dissolution risk, a behavioral separation predictor of months or years in advance. There seems to be a convergent effectiveness of several theoretically distinct models of reducing emotional divorce scores. This indicates that the work with emotional disconnection and psychological distance can be considered a transtheoretical therapeutic mechanism of special power in the context of divorce risk. Figure 2 presents a visual comparison of effect size estimates (Cohen's d) across primary intervention studies and meta-analyses included in this review, organized by counseling model.

3.7 Methodological Quality of Included Studies

Assessment of methodological quality using the RoB 2 and ROBINS-I tools revealed significant variability across included studies. Of the 58 included studies, 22 (38%) were classified as RCTs, of which 12 were assessed as low overall risk of bias, 8 as moderate risk, and 2 as high risk. The primary sources of bias risk in RCTs included: inadequate allocation concealment procedures; lack of intent-to-treat analysis; high attrition rates (exceeding 20% in 7 studies); and non-blinded outcome assessment for self-report measures. Among the 36 non-randomized studies, risk of bias

was generally higher, with 14 studies rated as moderate risk and 12 as serious risk. This is primarily due to confounding by selection into treatment, absence of control conditions, and reliance on unvalidated or locally developed outcome measures.

The heterogeneous element of outcome measurement was a significant finding of differences in past studies. The most popular scales of marital functioning used were the Dyadic Adjustment Scale (DAS) (Spanier, 1976) and the Marital Satisfaction Inventory-Revised (MSI-R) (Snyder, 1997), with 31 and 18 studies, respectively. Studies of Choice Theory-based interventions involved the Couple Burnout Measure (CBM) (Pines, 1996). Six studies specifically focused on emotional divorce outcomes were based on the emotional divorce scale (Kayir and Tekindal, 2020). Conflict behavior measures were more heterogeneous, and various systems of observational coding, self-report conflict frequency scales, and custom researcher-created measures were used by studies, making it difficult to compare across studies.

Follow-ups were carried out within three months to five years after treatment, and a longer follow-up has been reported mostly in IBCT (Christensen et al., 2010) and EFT (Johnson et al., 1999) studies. A lack of long-term follow-up evidence of SFBT and Choice Theory-based interventions is also a major gap in the evidence base. Moreover, very limited research documented data on actual separation or divorce rates as a main outcome, and used proxies like emotional divorce scores, divorce intentions, or marital satisfaction. The intervention research would be enhanced by a higher application of behavioral separation and divorce as the outcome variables in future studies (Lebow et al., 2012).

4. Discussion

This systematic review synthesized evidence from primary intervention studies (RCTs, quasi-experimental, pre-post, cohort) and Meta-analyses and systematic reviews evaluating the effectiveness of five major couple counseling models, i.e., EFT/EFCT, IBCT, TBCT, the Gottman Method, SFBT, and Choice Theory-based Couple Therapy. The studies focused specifically on outcomes related to marital conflict reduction, emotional divorce, and divorce risk. The overall results of the studies have firm and consistent evidence in favor of the effectiveness of structured couple counseling in minimizing these outcomes in different population groups and cultural settings. The review also investigated important differences between models in terms of the populations, mechanisms, and timeframes through which they operate most effectively.

4.1 Interpretation of Main Findings

Regarding RQ1, all five models found in the evidence base have been reviewed on married or long-term cohabiting couples utilizing quantitative intervention designs, EFT/EFCT, and IBCT/TBCT, with the most extensive and most rigorous evidence bases. The Gottman Method, SFBT, and Choice Therapy-based therapy are of smaller and yet expanding evidence bases that show significant treatment effects.

Regarding RQ2, there is a well-established effectiveness of couple counseling models in the context of minimizing marital conflict, which has effect sizes ranging between moderate ($d \approx 0.51$ in SFBT) and high ($d \approx 0.90$ in EFT) when compared to control conditions. IBCT showed highly significant impacts on severely distressed couples, EFT was most useful on emotionally withdrawn and attachment-insecure couples, and the Gottman Method showed similar results in changes of observable conflict behaviour in a wide range of samples. These results confirm and expand the results of earlier meta-analyses (Shadish and Baldwin, 2005; Wiebe and Johnson, 2016) by showing that various models exhibit different profiles of effectiveness with various subgroups of couples.

In relation to RQ3, findings regarding divorce risk outcomes, including emotional divorce, divorce intentions, and separation rates, are particularly notable. EFT demonstrated the strongest evidence for reducing emotional divorce and reversing active divorce intentions (Bazyari et al., 2024; Johnson et al., 1999). IBCT showed lower separation and divorce rates at five-year follow-up compared to TBCT (Christensen et al., 2010). Choice Theory-based therapy showed significant reductions in marital burnout and divorce-related cognitions (Moradianzand et. al., 2026). These findings suggest that couple counseling can meaningfully reduce the risk of relational dissolution, particularly when interventions are specifically designed and evaluated with divorce-risk outcomes in mind.

In relation to RQ4, there is meaningful evidence that different models are optimally suited to different couple profiles. EFT appears most suitable for couples characterized by attachment insecurity, high emotional withdrawal, and active divorce intentions. IBCT is particularly indicated for severely distressed couples with chronic, seemingly irresolvable differences. The Gottman Method is well-suited to couples requiring structured conflict regulation skills and intimacy rebuilding. SFBT is indicated for high-stress, time-limited contexts and couples who prefer strength-based, future-oriented approaches. Choice Theory-based therapy appears particularly relevant for couples characterized by high levels of external control behaviors and relational burnout.

In relation to RQ5, the evidence bases for couple counseling is characterized by significant methodological heterogeneity, with variable sample sizes, diverse outcome measures, inconsistent follow-up periods, and variable risk of bias across studies. The most methodologically rigorous evidence comes from the IBCT and EFT literatures, with several large-scale RCTs and long- term follow-up data. Significant gaps remain regarding the effectiveness of SFBT and Choice Theory-based therapy in diverse cultural contexts, the mechanisms of change across models, and the use of actual divorce rates as outcome variables.

4.2 Theoretical and Clinical Implications

The convergent effectiveness of theoretically distinct models in reducing marital conflict and divorce risk is consistent with the common factors hypothesis (Sprenkle et al., 2009; Wampold, 2001), which posits that the therapeutic relationship, expectancy for change, and structural

features of systematic intervention account for a large proportion of treatment effects across modalities. However, the evidence also reveals meaningful model-specific effects that argue against a purely common factors account. The particular effectiveness of EFT in reducing emotional divorce and reversing attachment-related withdrawal patterns is consistent with its theoretically specific targeting of these mechanisms; the durability of IBCT gains may reflect the unique contribution of acceptance-based components; and the Gottman Method's effectiveness in directly reducing observable negative conflict behaviors is consistent with its explicit behavioral skill-building focus.

For clinicians, these findings support a principle of differential therapeutics (Frances et al., 1984) in couple counseling: rather than applying a single model to all couples, clinicians should assess the specific profile of each couple's presenting difficulties and match interventions accordingly. Couples presenting with high levels of emotional withdrawal, attachment insecurity, and active divorce intentions may benefit most from EFT. Couples with chronic, severe distress and seemingly irresolvable differences may be best served by IBCT. Couples presenting primarily with conflict behavior problems and deteriorating friendship and intimacy may benefit most from the Gottman Method. High-stress, pragmatic, or time-limited contexts call for SFBT. Couples with high levels of control-based conflict and relational burnout may find Choice Theory-based approaches particularly accessible and effective.

The consistent evidence for the effectiveness of couples counseling in reducing marital conflict and divorce risk also has important policy implications. Despite robust evidence of effectiveness, couples counseling remains largely excluded from public health and insurance frameworks in many countries, leading to significant disparities in access by socioeconomic status, cultural background, and geographic location (Lebow et al., 2012; Stith et al., 2011). The cost-benefit argument for public investment in evidence-based couple counseling services is compelling: the economic, social, and child-welfare costs of marital conflict and divorce far exceed the costs of structured intervention (Amato, 2010). Advocacy for the inclusion of evidence-based couple counseling within national mental health policies and insurance frameworks is strongly warranted by the evidence synthesized in this review.

4.3 Cultural Considerations

A common and major limitation in the couple counseling literature is that most of the research has been done on the Western, educated, industrialized, rich, and democratic (WEIRD) population with little representation of couples in South Asian, Middle Eastern, African, Latin American and East Asian settings. Most likely, cultural factors such as collectivist and individualist value orientations, religious approaches to marriage, gender roles, and the perception of help-seeking and stigma moderate the effectiveness of Western-based models of interventions (Kayir and Tekindal, 2020; Nasrullah et al., 2014).

Some of the studies incorporated addressed couples counseling within non-Western settings. Rajaei et al. (2019) tested the Gottman Method on Iranian marriages of regular marital conflict,

and discovered that there were large decreases in emotional divorce and gains in communication skills in line with other studies. Mirzania et al. (2018) tested Choice Theory-based reality therapy on Iranian women who desired divorce and reported that the therapy resulted in significant decreases in conflict and improved marital satisfaction in a pretest-posttest controlled study. These studies are significant milestones in evidence-based study, however, they also emphasize that all significant couple counseling frameworks require systematic cultural adaptation and validation research.

To clinicians who have to deal with multicultural backgrounds, cultural assessment and competence are mandatory antecedents of effective couple counseling. Failure to find cultural adaptation of the models created in a Euro-American setting may lead to rupture of the therapeutic alliances, untimely end, and iatrogenic damage (McGoldrick et al., 2005). Future studies ought to focus on culturally modulated intervention trials in underrepresented groups and specifically in contexts like the Gulf nations and other South Asian cultures, whereby marital conflict and emotional divorce have cultural, religious, and family systemic complexities that are distinct.

4.4 Limitations of the Review

There are a few limitations that can be attributed to the present review when interpreting the results. First, the limitation of the English-language publications might have led to the removal of potentially pertinent studies published in other languages and especially not in a non-Western setting. Second, the main source of the exaggerated estimate of the treatment effect across the reviewed literature could be publication bias, i.e., the bias towards publication of journals reporting a large positive effect. Third, the outcome measures used by the studies varied, especially on marital conflict and emotional divorce, which restricted the applicability of the effect size estimates and did not allow a formal synthesis in the form of a meta-analysis. Fourth, quite a number of studies included in this review were based on self-report tools without the use of blind evaluation, which makes them subject to social desirability bias. Fifth, the strength of the inferences about the differences in the effect of the models is limited by the fact that there is a relatively small number of direct head-to-head comparisons between named models.

Nevertheless, the current review is the narrowest and most intensive synthesis of current research that has examined the effectiveness of named couple counseling models with special processing of the effects on marital conflict, emotional divorce, and risk of divorce. The approach involving the application of a systematic PICOS framework and pre-specified inclusion criteria, dual-reviewer selection and data extraction protocols, and tested quality assessment instruments promotes the methodological rigor and transparency of the synthesis.

5. Conclusion

The systematic review has been summarized from primary intervention studies (RCTs, quasi-experimental, pre-post, cohort) and Meta-analyses and systematic review studies. This study fills

an important gap in the literature of couple counseling models that specifically address marital conflict reduction and risk of divorce. The findings provide robust support for the effectiveness of structured couple counseling across diverse models and populations, with effect sizes ranging from moderate to large for outcomes including marital conflict frequency and intensity, emotional divorce, and divorce intentions.

Emotionally Focused Couple Therapy comes up as the most well-evidenced model regarding the minimization of emotional divorce and the reversal of active divorce intentions. This is based on a well-verified theoretical framework and several methodologically sound RCTs. The study shows the longest-term results are most enduring in the severely distressed couples with significantly reduced separation and divorce rates at the five-year follow-up in the Integrative Behavioral Couple Therapy. The Gottman Method generates consistent and strong gains in conflict behavior and intimacy among various groups of couples. As a resource- and time-limited situation of high stress, Solution-Focused Brief Couple Therapy is particularly a good alternative. The Couple Therapy based on the Choice Theory offers a unique and useful treatment approach to couples who exhibit external control patterns and relationship burnout.

The arguments clearly confirm the principle of differential therapeutics in couples counseling: adopting the intervention model to the particular profile of the presenting difficulties of the couple, cultural context, and treatment preferences will most probably maximize the outcome. Meanwhile, shared therapeutic variables such as the quality of therapeutic relationship, systematic structure of intervention, and empathic attunement seem to explain a significant and cross-theoretical percentage of treatment effects.

Critical gaps in the existing literature include the absence of long-term follow-up data for SFBT and Choice Theory-based interventions and the limited use of actual separation and divorce rates as primary outcome variables. Further, the other major gaps include the underrepresentation of non-Western and culturally diverse couple populations, and the scarcity of rigorous head-to-head comparisons between named models. Future couple counseling studies should focus on filling these gaps. In particular, the discipline would be enriched by: (1) Multi-site, large-scale RCTs, comparing named models with standard conflict and divorce-risk outcome batteries; (2) long-term (five to ten year) follow-up information to all major models; (3) systematic cultural adaptation and validation trials in South Asian, Middle Eastern, African, and Latin American populations; (4) dismantling studies to discover the active components within each model; (5) mechanistic research conducted to elucidate how each model works.

For practitioners, policy-makers, and couples themselves, the overarching message of this review is clear and evidence-based. The structured couple counseling works, multiple evidence-based models are available, and early intervention with couples in distress can meaningfully reduce the risk of marital dissolution and its wide-ranging consequences for individuals, families, and societies. Investment in the availability, accessibility, and quality of evidence-based couple counseling represents a high-return, evidence-supported policy priority.

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Figures

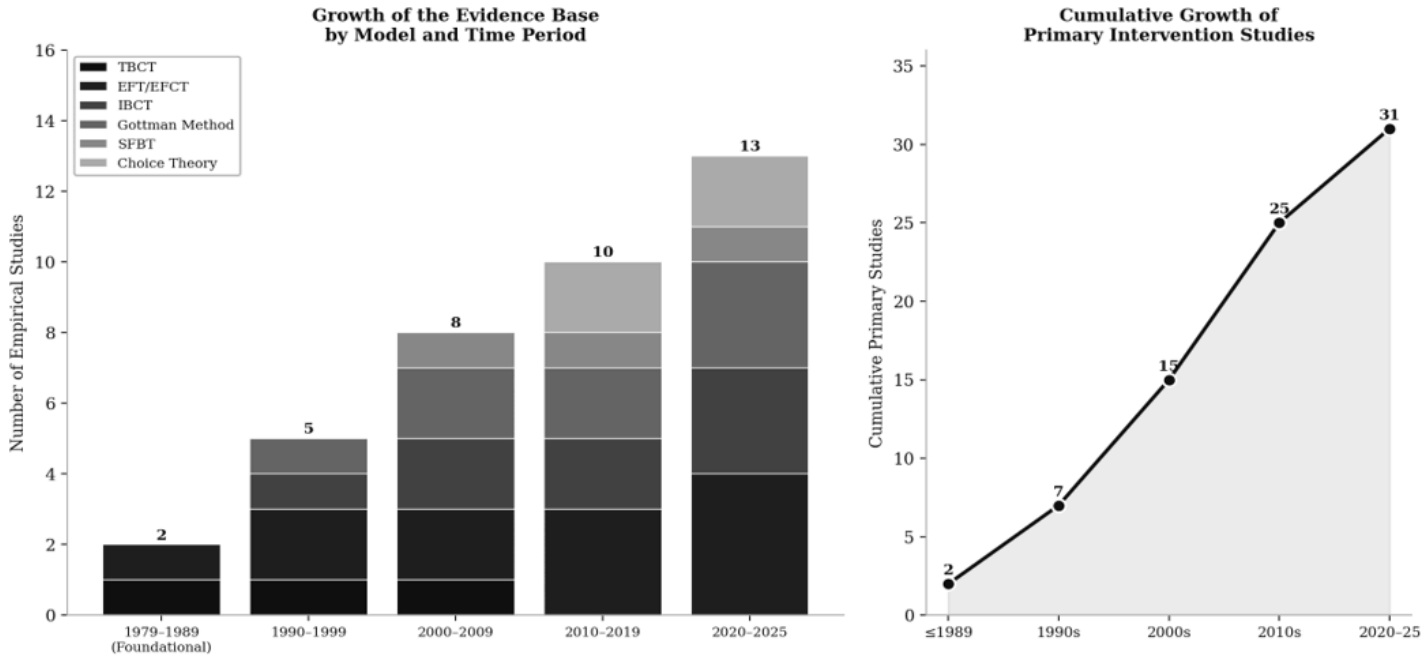

Figure 1

Growth of the empirical evidence base for evidence-based couple counseling models (1979–2025). Left panel: number of empirical studies per model per time period. Right panel: cumulative total of primary intervention studies. The accelerating trajectory in the 2010s and 2020s reflects increased investment in couple counseling research globally.

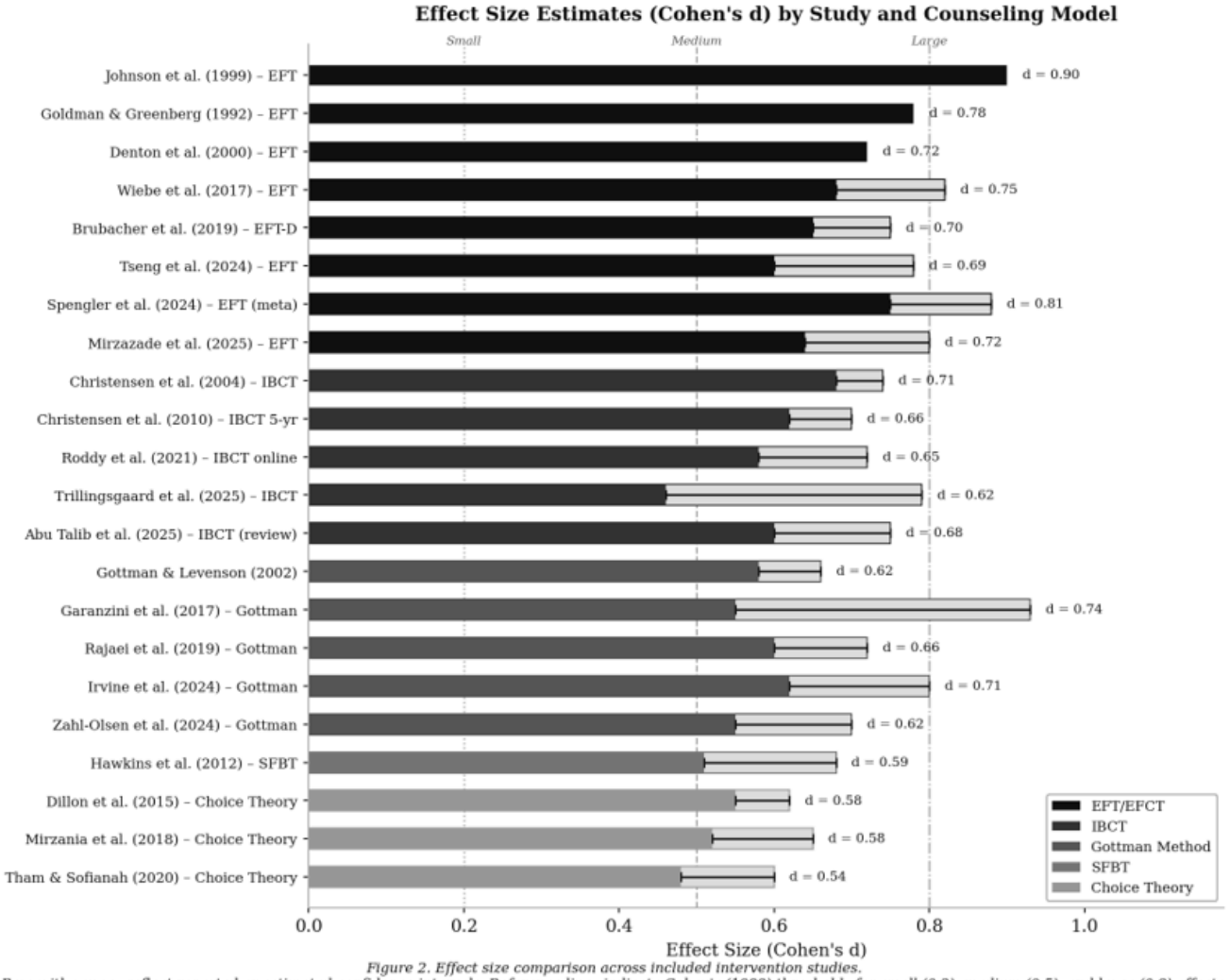

Figure 2. Effect size comparison across included intervention studies.
Bars with ranges reflect reported or estimated confidence intervals. Reference lines indicate Cohen's (1988) thresholds for small (0.2), medium (0.5), and large (0.8) effects.

Figure 2

Effect size estimates (Cohen's d) for primary intervention studies and meta-analyses by counseling model. Bars with ranges reflect reported or estimated confidence intervals. Reference lines indicate Cohen's (1988) thresholds for small (d = 0.2), medium (d = 0.5), and large (d = 0.8) effects.