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CONTENTS

EDITORIAL

Beáta Dávid – Ildikó Danis:

Editorial – Foreword to the 2025 Special Compilation on “Family Therapy and Family Studies in Supporting Mental Health”.

European Journal of Mental Health, 20, e0045, 1–4.

<https://doi.org/10.5708/EJMH.20.2025.0045>

RESEARCH ARTICLES

Pilinszki, Attila – Bata, Erzsébet – Demjén, Anna – Gervai, Judit – Danis, Ildikó (2025).

Coparenting Relationship Scale (CRS): Validation and Psychometric Properties of the Hungarian Version.

European Journal of Mental Health, 20, e0037, 1–13.

<https://doi.org/10.5708/EJMH.20.2025.0037>

REVIEW ARTICLES

James L., Spencer – Howlett, Emma – Ribeiro Nuez, Natércia (2025).

Navigating Global Family Diversity: Theory, Research, and Implications for Policy – A Narrative Review. European Journal of Mental Health, 20, e0040, 1–21.

<https://doi.org/10.5708/EJMH.20.2025.0040>

PERSPECTIVE ARTICLES

Scott R. Woolley – Réka Koren:

Using the Woolley Motivation Typology to Heal Infidelity With Emotionally Focused Therapy.

European Journal of Mental Health, 20, e0035, 1–10.

<https://doi.org/10.5708/EJMH.20.2025.0035>

Lee N. Johnson – Shayne R. Anderson – Kaelie N. Wagner:

The Marriage and Family Therapy Practice Research Network: Current Findings and a Call for Collaboration.

European Journal of Mental Health, 20, e0036, 1–9.

<https://doi.org/10.5708/EJMH.20.2025.0036>

Szondy, Máté Bence – Magyary, Ágnes (2025).

Artificial Intelligence (AI) in the Family System: Possible Positive and Detrimental Effects on Parenting, Communication and Family Dynamics.

European Journal of Mental Health, 20, e0038, 1–8.

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EDITORIAL

Foreword to the 2025 Special Compilation on “Family Therapy and Family Studies in Supporting Mental Health”

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word, we – a sociologist and a psychologist – aim to present some interdisciplinary thoughts on contemporary family life, family studies, and family interventions.

The concept of family occupies a central position across a wide range of scientific disciplines and professional practices. However, interpretations of what family means vary significantly depending on the perspective and focus of each field. Understanding family concepts and relationships in medicine, psychology, sociology, and education directly influences interventions designed to support the physical and mental well-being of individuals and families. Developing a shared language for discussing and examining family life is essential for ensuring the effectiveness of decisions, interventions, and actions that affect families (Crosbie-Burnett & Klein, 2009).

In a broad sense, a family may be defined as “*a group of individuals who are connected to each other emotionally, cognitively, and usually behaviorally, regardless of legal ties and physical locations, potentially even including deceased persons*” (Crosbie-Burnett & Klein, 2009, p. 38). Family forms and family life are fundamentally shaped by culture, social structures, and historical context. This means that definitions and understandings of family are

Harmonious and resilient relationships within couples and families contribute to the well-being and life satisfaction of individuals as well as to the strength of societies. Conversely, chronic challenges and difficulties in close relationships and family functioning can make individuals and wider communities vulnerable (Li et al., 2025; Walsh, 2016). Systemic family therapy, combined with informal support from family members and their communities, can be an effective intervention in child and family protection (Hertlein, 2023). The Special Call titled “Family Therapy and Family Studies in Supporting Mental Health” was announced in 2024 following a significant period of population stress in recent years, during which family resilience and support were of paramount importance globally due to health crises, natural disasters, geopolitical conflicts, wars, and economic hardships. The peer-reviewed and edited articles were published throughout the year, and we are now publishing the entire Special Compilation at the beginning of the academic year. In addition to other publications in our journal, this 2025 Special Compilation features five articles. In this short editorial fore-

not universal and are continuously evolving. In the early stages of family studies, particularly in Euro-American contexts, the theoretical framework predominantly encompassed more restrictive definitions with a pronounced emphasis on legally recognized nuclear households of middle-class families (Cheal, 2008). However, demographic trends, developing social ideologies, and shifting cultural expectations have contributed to a wider recognition of family diversity over time, highlighting the increasingly pluralistic and dynamic nature of family forms and functioning in contemporary societies (Kramer, 2021; Smock & Schwartz, 2020). Thus, family can be conceptualized as a social construct that emerges through the interactions and observations of individuals within particular cultural and historical contexts. Consequently, families can be regarded as dynamic systems that create meaning for their members and the wider environment (Cheal, 2008).

Contemporary demographic phenomena are often interpreted as signs of social or familial crises and relational uncertainty. Examples include declining marriage rates, increasing rates of non-marital cohabitation, rising divorce rates, declining fertility, the postponement of childbearing, and rising rates of childlessness (OECD, 2011; Seltzer, 2019; Smock & Schwartz, 2020). However, as Hungarian sociologists Tóth and Dupcsik (2007) pointed out, families as social institutions have historically undergone significant changes, which are often accompanied by moral panic and societal anxiety. Currently, there is a demonstrable shift in family and individual life courses, a phenomenon reflected in measurable demographic trends. Despite these structural and demographic changes, Tóth and Dupcsik (2007) conclude that the role of the family remains fundamental: *"There is no societal entity that questions the significance of the family in society and individuals' lives"* (p. 432). While forms of cohabitation and family structures are diversifying, the functional significance of families in supporting individual and societal well-being remains indisputable (Tóth, 2012).

In recent decades, a variety of factors, including changes in working patterns, economic conditions, technological developments, and diverse personal and family choices, have significantly impacted societies in developed countries. Economic and social changes occurring simultaneously in developing countries have also led to a change in how families are viewed, as well as the practical preferences associated with family life (Furstenberg, 2019; Mokomane, 2023). In such contexts, researchers and practitioners must demonstrate a high level of cultural sensitivity. Translation studies, where scientific knowledge informs practice, serve as a crucial bridge between current family theories and family-related interventions (Thoburn & Sexton, 2016).

Although the traditional concept of the nuclear family remains important to many, it does not reflect the experiences of many others around the world. Therefore, when helping couples and families, it is important to consider both their structure and how they function (Weston & Hayes, 2012).

Theoretically, systemic family psychology views the family as a complex, open system that is constantly changing and interacting with its surroundings. The model identifies three interconnected processes: the individual level within the self, the relationship level between people, and the social and environmental level representing the wider world. These processes affect each other over time. Family systems operate at various levels, including individuals, couples, families, extended families, communities, and cultures (Carr, 2016; Stanton, 2009). The way a family functions is an indication of how well each individual and the family as a whole will fare (Harjis, 2025; Izzo et al., 2022), significantly impacting various domains, including mental and emotional health, relationship quality, personality development, academic performance, and social integration. This raises the question: Is there a form of family functioning that can be considered "normal"?

In her 2012 article "The New Normal", Walsh — a leading researcher in family resilience studies — argues that modern families are far more diverse than those of the past. The concept of "normal" in psychology, once widely used, is now being replaced by the idea that there is significant variation and that what is "optimal" depends on the situation. What is considered normal is determined by societal norms and prevailing attitudes. Walsh (2012) notes that most well-known ideas about family development originate from Euro-American sources and were created by white, middle-class individuals who studied families from similar backgrounds. As families become more diverse, we need to recognize that there is no single type of family. The way a family functions cannot be understood universally, but rather in relation to a family's values, organization, relationships, social environment, and lived experiences (Nichols, 2013; Walsh, 2003, 2016).

Twenty-first-century families face many challenges. International organizations such as UNICEF, the WHO, the World Bank, the OECD, and the European Union discuss key issues (see policy papers and reviews on these organizations' websites). These issues include balancing family, work, and private life; addressing the challenges posed by ageing populations, such as the burden on care systems and the "sandwich generation"; reducing social inequalities and child poverty; managing community crises and trauma, such as war, terrorism, and migration; tackling the growing prevalence of mental health disorders; and responding to global environmental threats such

as climate change and pandemics. In order to address these complex issues, it is crucial to engage individuals, families, communities, society as a whole, and regions at multiple levels. In times of crisis, it is vital to have supportive policies in place. While families naturally provide individuals with protection, they can also be at risk. In such cases, societal systems can offer additional support. It is essential to recognize and value diversity, promote strategies that leverage people's strengths and resources, and foster supportive social environments (Nichols, 2013).

The articles included in this Special Compilation are related to the above themes in several ways. They explore family structures and demographic trends in different regions of the world; contemporary issues related to artificial intelligence in family life; the stability and vulnerability of couple relationships and co-parenting; and monitoring the effectiveness of couple and family therapy interventions.

In their narrative review, *James L. Spencer et al. (2025)* provide a concise summary of global family trends, including marriage, cohabitation, divorce, parent-child relationships, and kinship patterns. The findings suggest that, alongside modernization and economic development, shifting gender norms as well as cultural and religious factors influence family transformation, resulting in distinct regional patterns. Policymakers and researchers must be aware of these trends in order to support family well-being.

Integrating AI into family life is a significant and multifaceted issue. While AI can offer benefits such as enhancing communication, supporting various family roles, and promoting family cohesion, it also introduces challenges. The key message of *Szondy and Magary's (2025)* perspective article is that, to ensure AI aligns with family values and strengthens bonds, a careful balance must be struck to avoid the negative effects of over-reliance and address ethical and privacy concerns. This emphasizes the importance of fostering AI literacy within families.

In their perspective article, *Woolley and Koren (2025)* present a practical framework for addressing infidelity. They integrate Woolley's (2011) motivation-based typology of affairs into Emotionally Focused Therapy (EFT) and the Attachment Injury Repair Model (AIRM). This framework offers both general and specific treatment recommendations, based on an understanding of different motivational types, which could help therapists support their clients more effectively.

Co-parenting is a key concept in developmental psychology and systemic family therapy. Over the past decades, several theorists have developed various dimensions and measurement tools for it. Using a sample of Hungarian mothers, *Pilinszki et al. (2025)* validated the long and short versions of the widely used Coparenting Relationship Scale (CRS; Feinberg et al., 2012), a reliable and valid measurement tool based on Feinberg's theoretical concept (2003). This instrument reliably and validly assesses parental cooperation across several national adaptations, including the Hungarian context. Information gathered by the instrument can serve as an important reference point in family research, family therapy, and child welfare and protection work.

In their article, *Johnson et al. (2025)* introduce the Marriage and Family Therapy Practice Research Network (MFT-PRN; Johnson et al., 2017) and summarize the network's existing research findings. After providing a brief introduction to Routine Outcome Monitoring and the practice research network approach in marriage and family therapy, the article reviews the MFT-PR's procedures and assessment instruments, emphasizing the advantages and disadvantages of implementing them. It then summarizes key topics and findings from studies based on MFT-PRN data, including work on questionnaire development, therapeutic alliance, therapy outcomes, and the use of teletherapy. Given the rising prevalence of mental health and relational difficulties, the authors argue that networks such as the MFT-PRN are especially valuable for bridging research and practice, improving client care, and advancing systemic therapy. To date, the MFT-PRN has collected data on over 14,000 clients and continues to undergo further improvements and expand its network of partners.

In summary, the objective of the Special Compilation is to contribute to ongoing efforts by integrating perspectives from family sociology and family psychology. The compilation highlights both the theoretical foundations and the practical interventions required to address the evolving realities of family life and the diversity of family structures and processes. It also explores the resilience mechanisms that enable families to navigate contemporary social, economic, and environmental challenges. In a rapidly changing world, it is crucial for those seeking to promote family well-being and social cohesion — including researchers, policymakers, and practitioners — to understand families as dynamic, contextually embedded systems that demonstrate adaptability and evolution.

Budapest, 30 September 2025

Beáta Dávid, Editor-in Chief and **Ildikó Danis**, Deputy Editor-in-Chief

References

Carr, A. (2016). The evolution of systems theory. In T. L. Sexton & J. Lebow (Eds.), *Handbook of family therapy* (pp. 13–29). Routledge.

Cheal, D. (2008). *Families in today's world: A comparative approach*. Routledge. <https://doi.org/10.4324/9780203007211>

Crosbie-Burnett, M., & Klein, D. M. (2009). The fascinating story of family theories. In J. H. Bray & M. Stanton (Eds.), *The Wiley-Blackwell handbook of family psychology* (pp. 37–52). Wiley.

Feinberg, M. E. (2003). The internal structure and ecological context of coparenting: A framework for research and intervention. *Parenting: Science and Practice*, 3(2), 95–131. https://doi.org/10.1207/S15327922PAR0302_01

Feinberg, M. E., Brown, L. D., & Kan, M. L. (2012). A multi-domain self-report measure of coparenting. *Parenting: Science and Practice*, 12(1), 1–21. <https://doi.org/10.1080/15295192.2012.638870>

Furstenberg, F. F. (2019). Family change in global perspective: How and why family systems change. *Family Relations*, 68(3), 326–341. <https://doi.org/10.1111/fare.12361>

Harjis, J. (2025, July 8). The role of family functioning in shaping children's mental health outcomes: A systematic review. *SSRN*. <https://doi.org/10.2139/ssrn.5343899>

Hertlein, K. M. (2023). *The Routledge international handbook of couple and family therapy*. Routledge. <https://doi.org/10.4324/9781003297871>

Izzo, F., Baiocco, R., & Pistella, J. (2022). Children's and adolescents' happiness and family functioning: A systematic literature review. *International Journal of Environmental Research and Public Health*, 19(24), Article 16593. <https://doi.org/10.3390/ijerph192416593>

Johnson, L. N., Anderson, S. R., & Wagner, K. N. (2025). The Marriage and Family Therapy Practice Research Network: Current findings and a call for collaboration. *European Journal of Mental Health*, 20, Article e0036, 1–9. <https://doi.org/10.5708/EJMH.20.2025.0036>

Johnson, L. N., Miller, R. B., Bradford, A. B., & Anderson, S. R. (2017). The Marriage and Family Therapy Practice Research Network (MFT-PRN): Creating a more perfect union between practice and research. *Journal of Marital and Family Therapy*, 43(4), 561–572. <https://doi.org/10.1111/jmft.12238>

Kramer, K. L. (2021). The human family – Its evolutionary context and diversity. *Social Sciences*, 10(6), Article 191. <https://doi.org/10.3390/socsci10060191>

James, S. L., Howlett, E., & Ribeiro Nuez, N. (2025). Navigating global family diversity: Theory, research, and implications for policy – A narrative review. *European Journal of Mental Health*, 20, Article e0040, 1–21. <https://doi.org/10.5708/EJMH.20.2025.0040>

Li, R., Wu, D., Zhu, L., Mi, T., Jia, S., & Ren, Z. (2025). The association between family resilience and psychological well-being during the COVID-19 pandemic: A three-level meta-analysis. *Journal of Health Psychology*, 30(10), 2411–2428. <https://doi.org/10.1177/13591053241311572>

Mokomane, Z. (2023). *The impact of demographic trends on families*. United Nations, Department of Economic and Social Affairs. <https://social.desa.un.org/sites/default/files/inline-files/DemographicTrends-FamilyImpact%20ZITHA%20MOKOMANE.pdf>

Nichols, W. C. (2013). Roads to understanding family resilience: 1920s to the twenty-first century. In D. S. Bevar (Ed.), *Handbook of family resilience* (pp. 3–16). Springer. https://doi.org/10.1007/978-1-4614-3917-2_1

Organisation for Economic Co-operation and Development (OECD) (2011). *Doing better for families*. OECD Publishing. <https://doi.org/10.1787/9789264098732-en>

Pilinszki, A., Bata, E., Demjén, A., Gervai, J., & Danis, I. (2025). Coparenting Relationship Scale (CRS): Validation and psychometric properties of the Hungarian version. *European Journal of Mental Health*, 20, Article e0037, 1–13. <https://doi.org/10.5708/EJMH.20.2025.0037>

Seltzer, J. A. (2019). Family change and changing family demography. *Demography*, 56(2), 405–426. <https://doi.org/10.1007/s13524-019-00766-6>

Smock, P. J., & Schwartz, C. R. (2020). The demography of families: A review of patterns and change. *Journal of Marriage and Family*, 82(1), 9–34. <https://doi.org/10.1111/jomf.12612>

Stanton, M. (2009). The systemic epistemology of the specialty of family psychology. In J. H. Bray & M. Stanton (Eds.), *The Wiley-Blackwell handbook of family psychology* (pp. 5–20). Wiley-Blackwell.

Szondy, M. B., & Magyary, Á. (2025). Artificial intelligence (AI) in the family system: Possible positive and detrimental effects on parenting, communication and family dynamics. *European Journal of Mental Health*, 20, Article e0038, 1–8. <https://doi.org/10.5708/EJMH.20.2025.0038>

Thoburn, J. W., & Sexton, T. L. (2016). *Family psychology: Theory, research, and practice* (pp. 21–44). Praeger.

Tóth, O. (2012). Társadalmi integráció és család [Social integration and family]. In I. Kovách, Cs. Dupcsik, T. P. Tóth, & J. Takács (Eds.), *Társadalmi integráció a jelenkorú Magyarországon* [Social integration in contemporary Hungary] (pp. 369–382). Argumentum Kiadó; MTA Társadalomtudományi Kutatóközpont Szociológiai Intézet. <https://mek.oszk.hu/12700/12706/12706.pdf>

Tóth, O., & Dupcsik, Cs. (2007). Családok és formák – változások az utóbbi ötven évben Magyarországon [Families and Forms - Changes in Hungary During the Last Fifty Years]. *Demográfia*, 50(4), 430–437. <https://www.demografia.hu/demografia/index.php/demografia/article/view/557>

Walsh, F. (2003). Family resilience: A framework for clinical practice. *Family Process*, 42(1), 1–18. <https://doi.org/10.1111/j.1545-5300.2003.00001.x>

Walsh, F. (2012). The new normal: Diversity and complexity in 21st-century families. In F. Walsh (Ed.), *Normal family processes: Growing diversity and complexity* (pp. 3–27). Guilford Press. <https://doi.org/10.13140/2.1.3740.5765>

Walsh, F. (2016). *Strengthening family resilience* (3rd ed.). Guilford Press.

Weston, R., Qu, L., & Hayes, A. (2012). From form to function: Contemporary choices, changes and challenges. In P. Noller & G. C. Karantzas (Eds.), *The Wiley-Blackwell handbook of couples and family relations* (1st ed., pp. 11–24). Wiley-Blackwell.

Woolley, S. R. (2011, June 3). *Healing affairs using emotionally focused therapy* [Workshop presentation]. Training and Research Institute for EFT, San Diego, CA.

Woolley, S. R., & Koren, R. (2025). Using the Woolley Motivation Typology to heal infidelity with emotionally focused therapy. *European Journal of Mental Health*, 20, Article e0035, 1–10. <https://doi.org/10.5708/EJMH.20.2025.0035>

RESEARCH ARTICLE

This publication is part of the [2025 SPECIAL COMPILATION](#) on
"Family Therapy and Family Studies in Supporting Mental Health"

Coparenting Relationship Scale (CRS): Validation and Psychometric Properties of the Hungarian Version

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Introduction

Coparenting focuses on interactions and relationships between parents, more specifically on the functioning of the parent subsystem. Feinberg (2003, p. 96) defined coparenting as "a conceptual term that refers to the ways that parents and/or parental figures relate to each other in the role of parent". Coparenting is a multidimensional construct that describes the system of parental relationship dynamics related to the upbringing of children; thus,

Introduction: This study aims to investigate the validity and psychometric properties of the Hungarian version of the Coparenting Relationship Scale (CRS-HU), a measurement designed to assess different dimensions of coparenting. Only a few validation studies can be found, even though CRS is a widely used measurement.

Methods: Currently, no assessment instruments exist in Hungarian that measure coparenting relationships and practices; therefore, we adapted CRS and designed a validation study to investigate mothers' coparenting characteristics ($N = 381$). We checked the construct validity using confirmatory factor analysis (CFA), then to assess convergent and discriminant validity, we examined correlations between the coparenting questionnaire factors and other similar constructs. We also examined the relationship between CRS-HU and different background variables using Kruskal-Wallis and Mann-Whitney tests.

Results: Our main results showed that the internal consistency in the Hungarian version of CRS and its subscales is good or excellent (Cronbach's α = .75–.89). The seven-factor structure had a poor model fit in CFA, however, the brief version of the CRS-HU ($RMSEA = .057$; $CFI = .962$) and six subscales separately ($RMSEA = .031$ –.066; $CFI = .978$ –.999) demonstrated a good model fit.

Conclusions: The brief version of Hungarian CRS and the different subscales are valid and feasible measures for assessing coparenting and its dimensions. Thus, CRS can be effectively used at last in our culture, as well.

Keywords: coparenting, measurement, validation, Coparenting Relationship Scale (CRS), Confirmatory Factor Analysis (CFA)

it is advantageous to use a tool that can measure the complexity of several dimensions/subconstructs at the same time (Beckmeyer et al., 2014; Finzi-Dottan & Cohen, 2014; McHale, 1995).

The study of coparenting across various family structures is primarily grounded in a systems perspective, which helps to understand the formation and maintenance of coparenting relationships. Family Systems Theory (Goldenberg et al., 2017; Minuchin, 1974; Von Bertalanffy, 1968) has become a central systemic framework in both research and practical applications. According to this paradigm, the family is viewed as both a relationship system and an emotional system, where members influence and are influenced by one another through communication across individual, dyadic, triadic, systemic, and intergenerational dimensions. Within this framework, the importance of a stable coparenting subsystem is emphasized as a distinct element that functions in parallel with other subsystems, regardless of whether the adult relationship is intact or has transitioned (Cox & Paley, 2003).

In recent years, researchers have developed and utilized various self-reported questionnaires and scales for coparenting, each emphasizing different aspects within the coparenting theme. Here are some examples, without claiming to be exhaustive: Parenting Alliance Measure (PAM) (Camisasca et al., 2014; Konold & Abidin, 2001; Lamela et al., 2013), Partner Parental Support Questionnaire (PPSQ) (Gillis & Roskam, 2019, 2020), Coparenting Questionnaire (CQ) (Barzel & Reid, 2011; Margolin et al., 2001; Pedro & Ribeiro, 2015); Feeding Coparenting Scale (FCS) (Sherrard & Tan, 2022; Tan et al., 2019), Coparenting Across Family Structures (Co-PAFS) (Archer-Kuhn et al., 2023; Pruitt et al., 2021; Saini et al., 2019), Coparenting Inventory for Parents and Adolescents (CI-PA) (Láng, 2018; Teubert & Pinquart, 2011; Zimmermann et al., 2022).

Based on Feinberg's (2003) conceptual framework of the coparenting relationship, the CRS measure included four overlapping domains: childrearing agreement, coparental support/undermining, division of labor, and joint management of the family dynamics. Most of the instrument's initial 47 items derive from previous coparenting questionnaires, but some new items were also created. After psychometric analyses, 35 items remained in the scale (Feinberg et al., 2012). The authors organized items into seven subscales connected to the four theoretical domains: 1) agreement (Coparenting Agreement, six items); 2) support/undermining (Coparenting Support, four items; Coparenting Undermining, six items; Endorse Partner Parenting, seven items); 3) joint family management (Exposure to Conflict, five items) and division of labor (Division of Labor, two items). In addition, a subscale was created to measure enhancing intimacy (Coparenting Closeness, five items). The authors also developed a brief 14-item instrument of coparenting (Brief version of Coparenting Relationship Scale; B-CRS) using two items from each of the seven subscales.

In the original study (Feinberg et al., 2012), researchers validated the instrument via a longitudinal survey of a sample including 169 co-resident heterosexual parents who were expecting their first child. The internal consistency of the whole CRS questionnaire was excellent (Cronbach's alphas ranged from .91 to .94 across gender and data collection time points). The seven coparenting subscales ($\alpha = .61\text{--}.90$) and the 14-item B-CRS ($\alpha = .81\text{--}.89$) had generally high internal consistencies with a few exceptions (Agreement, Endorse Partner's Parenting in some waves among mothers and/or fathers). Correlations between the full and the brief versions of CRS were very high ($r_{mothers} = .97$; $r_{fathers} = .94$), and the subscale scores were also moderately to strongly correlated ($r = .54\text{--}.85$) with the total CRS score, except for the Division of Labor subscale for fathers ($r = .37$). Longitudinal confirmatory factor analysis by structural equation modeling was used to check the factor structure and temporal stability. The fit indices of the model proved to be acceptable ($RMSEA = .06$; $CFI = .93$). The results indicate that coparenting scores remained stable across time ($\beta_{\text{Wave2-Wave3}} = .74$; $\beta_{\text{Wave3-Wave4}} = .71$).

Although CRS is a widely used instrument in non-English speaking countries (Camisasca et al., 2019; Garcia-Huidobro et al., 2019; Lamela et al., 2016; Mikolajczak et al., 2018; Roskam et al., 2018), only a few validation studies can be found (Antiwati & Purnomo, 2023; Carvalho et al., 2018; Dumitriu et al., 2022; Favez et al., 2021; Ju et al., 2023; Lamela & Jongenelen, 2018; Lee et al., 2021) in the literature. These validation studies showed that the internal consistencies of the full ($\alpha_{\text{Portuguese}} = .74$; $\alpha_{\text{French}} = .85$) and the brief versions of CRS ($\alpha_{\text{Swedish}} = .85\text{--}.86$; $\alpha_{\text{French}} = .70$; $\alpha_{\text{Indonesian}} = .88$) were generally high (Antiwati & Purnomo, 2023; Favez et al., 2021; Feinberg et al., 2020; Lamela & Jongenelen, 2018). Although in the Brazilian adaptation of the CRS, the average scores of the full and the brief versions were not calculated, four subscales had good internal consistencies in the Brazilian sample (Exposure to Conflict, Coparenting Support, Coparenting Undermining, Endorse Partner's Parenting). Despite some problems with the remaining three subscales (Coparenting Agreement, Coparenting Closeness, Division of Labor), CRS is still used in Brazil (Carvalho et al., 2018). Lamela and Jongenelen (2018) adapted and validated the CRS among Portuguese mothers. The model fit of the confirmatory factor analysis was satisfactory, with acceptable convergent and divergent validity, and good internal consistencies in the subscales, so the psychometric quality of the Portuguese version proved to be adequate. The French adaptation of the CRS

in a sample of Swiss fathers and mothers was valid, the original seven-factor structure could properly explain the variance of the data collected in the French-speaking part of Switzerland (Favez et al., 2021). Lee et al. (2021) tested the reliability and validity of the brief CRS among Swedish fathers. All but one subscale (Division of Labor) were strongly correlated with the overall B-CRS score, so the Swedish Brief Coparenting Relationship Scale consists of only 12 instead of 14 items. In the Romanian adaptation of the questionnaire, 6 factors and 28 items were retained during the factor analysis. All six factors were found to have good internal consistency. The sample consisted of Romanian parents, the majority of whom were married, but divorced parents also appeared (Dumitriu et al., 2022). Ju et al. (2023) finalized the CRS-C, the Chinese version, with 6 factors and 27 items. Cohabiting couples were also included in the study. The Cronbach's alpha for the six factors ranged between 0.69 and 0.93. **Table 1** contains the internal reliability (alpha) scores in the different versions of CRS, by gender and the different validation studies.

This article aims to present the Hungarian adaptation and validation of the Coparenting Relationship Scale (CRS) (Feinberg et al., 2012) interpreting the questionnaire's psychometric characteristics in the context of previous validation studies.

Table 1. Internal Reliability of CRS in Previous Studies

Scale (number of items)	Original CRS (Feinberg et al., 2012)*	The Brazilian version of CRS (Carvalho et al., 2018)	The Portuguese version of CRS (Lamela et al., 2018)	The French version of CRS (Favez et al., 2021)	The Swedish version of B-CRS (Lee et al., 2020)	The Romanian version of CRS (Dumitriu et al., 2022)	The Indonesian version of CRS (Antawati et al., 2023)	The Chinese version of CRS (Ju et al., 2023)
CRS Total (35)	$\alpha = .91-.94$	-	$\alpha = .74$	$\alpha = .85$	-	-	-	-
CRS Brief (14)	$\alpha = .81-.89$	-	-	$\alpha = .70$		-	-	-
CRS Brief (12)					$\alpha = .85-.86$	-	-	
CRS Brief (13)							$\alpha = .88$	
Coparenting Agreement (4)	$\alpha = .66-.74$	$\alpha = .68$	$\alpha = .70$	$\alpha = .82$		$\alpha = .87$		$\alpha = .75$
Coparenting Closeness (5)	$\alpha = .75-.83$	$\alpha = .46$	$\alpha = .84$	$\alpha = .80$		$\alpha = .87$		$\alpha = .69$
Exposure to Conflict (5)	$\alpha = .81-.90$	$\alpha = .81$	$\alpha = .81$	$\alpha = .90$		$\alpha = .95$		$\alpha = .93$
Coparenting Support (6)	$\alpha = .86-.89$	$\alpha = .83$	$\alpha = .94$	$\alpha = .93$		$\alpha = .95$		$\alpha = .89$
Coparenting Undermining (6)	$\alpha = .80-.85$	$\alpha = .72$	$\alpha = .79$	$\alpha = .86$		$\alpha = .89$		$\alpha = .81$
Endorse Partner's Parenting (7)	$\alpha = .61-.88$	$\alpha = .78$	$\alpha = .77$	$\alpha = .90$		$\alpha = .92$		$\alpha = .75$
Division of Labor (2)	$r = .33-.59$	$\alpha = .16$	-	$\alpha = .50$	-	-		-

* Feinberg's original results were based on longitudinal research, while the other studies were cross-sectional.

Methods

Participants

The analytical sample consisted of 381 women (aged 24–49 years, $M = 36.1$, $SD = 5.1$), who raised an average of two children ($SD = 1.1$), with the youngest being under six years old ($M = 2.3$, $SD = 1.8$). We summarized socio-demographic data in **Table 2**. Married (88.2%) and high-educated (82.1%) women were overrepresented in the sample.

Table 2. Description of the Sample ($N = 381$)

	Value	
	<i>n</i>	%
Education		
Secondary school	68	17.8
Higher education	292	76.6
Postgraduate (Ph.D., DLA)	21	5.5
Type of partnership		
Marriage	335	87.9
Cohabitation	46	12.1
Children in the household		
1 child	141	37.0
2 children	130	34.1
3 or more children	110	28.9
Age of the youngest child	2.3 (<i>M</i>)	1.8 (<i>SD</i>)
Age of the oldest child	7.3 (<i>M</i>)	4.9 (<i>SD</i>)

Procedure

Two independent professionals translated the CRS and other coparenting instruments into Hungarian; after comparing these versions for inconsistencies, the final versions were accepted by consensus. Then a third professional back-translated these approved Hungarian text into English, also blindly and independently. The back-translations were compared with the original measures and checked for inconsistencies. After slight changes, the translators accepted the final Hungarian version by consensus (Danis et al., 2019; The Hungarian translation is available here: https://semmelweis.hu/mental/files/2025/02/Feinberg_Coparenting_Relationship_Scale_HU-1.pdf). The research was approved by the Research Ethics Committee of Semmelweis University, Budapest, Hungary (license number: RKEB 143/219).

We collected the sample using the online LimeSurvey tool, and the questionnaire was made available between 21 August and 10 September 2019. The survey was disseminated via snowball sampling method through various mailing lists and social media platforms. This approach allowed us to reach a broad audience quickly, but it also introduced certain biases due to the nature of non-probability sampling. Specifically, the sample predominantly consisted of women, with men comprising less than 10% of the respondents. This gender imbalance in participation is an important finding in itself. It suggests that the applied sampling method and dissemination channels did not effectively engage male participants, even though the dyadic nature of coparenting emphasizes the importance of including both parents' perspectives. While the present study focuses on the psychometric validation of the CRS-HU, subsequent research targeting the broader topic of coparenting dynamics should explicitly aim to involve both mothers and fathers.

We opted for Multiple Imputation (MI) to handle missing data due to its advantages in ensuring unbiased estimates and maintaining the integrity of the dataset for the analyses performed. Specifically, we applied MI because the use of a bootstrap procedure in the confirmatory factor analysis (CFA) necessitated a complete dataset, as the method cannot process missing data. Instead of simpler approaches, such as mean imputation, we chose the more sophisticated MI method to preserve the variability and relationships within the data, avoiding potential biases introduced by less nuanced methods.

From the initial sample of 557 participants who completed the survey, 193 provided only partial responses. Participants who answered fewer than 20 of the 35 CRS items ($n = 124$) were excluded from the analysis. In the

resulting reduced dataset, the proportion of missing data for the CRS items was exceptionally low (0.53%).

To ensure the robustness of the imputations, we conducted sensitivity analyses comparing key statistics (means and standard deviations) of the CRS items before and after imputation. For most items, the means and standard deviations were identical up to two decimal places, and no significant differences were observed for any item. This consistency supports the validity of the MI approach in this context.

The MI procedure was conducted using SPSS 25.0, generating a complete dataset suitable for all subsequent analyses while maintaining the original dataset's quality and accuracy.

In psychometric and validation studies, sample homogenization occurs as a common practice to ensure that the results accurately reflect the properties of the measurement tool rather than the influence of external or confounding variables. By reducing variability in key demographic characteristics (e.g., education level), we aimed to control for potential biases that might arise from heterogeneity in the participants' ability to comprehend and respond to the questionnaire items. To homogenize our sample, some exclusion criteria were applied: divorced/separated participants ($n = 16$), men ($n = 25$), and respondents with a low level of education ($n = 11$) were excluded.

Measures

The *Coparenting Relationship Scale (CRS)* is a self-report instrument of coparenting constructed by Feinberg et al. (2012) according to Feinberg's theoretical concept (2003). The scale is comprised of 35 items divided into seven subscales: Coparenting Agreement (four items); Coparenting Closeness (five items); Exposure to Conflict (five items); Coparenting Support (six items); Coparenting Undermining (six items); Endorse Partner Parenting (seven items); Division of Labor (two items). We assessed the items using a 7-point Likert type scale that ranges from "not true of us or never" (0) to "very true of us or very often" (6) depending on the questions asked. The scale also has a brief version with 14 items (B-CRS). The internal consistency (Cronbach's α) of the original instrument, the brief version, and the different subscales in the previous research were appropriate or excellent (see details in Table 1).

The *Daily Coparenting Scale (D-Cop)* is a short 10-item measure developed and introduced by McDaniel and colleagues (2017) that can be administered daily (e.g., seven consecutive days) for measuring perceptions of coparenting quality (e.g., "I felt like part of a real parenting team."); "We had different ideas about parenting."; "We trusted one another's parenting."). The instrument uses a seven-point Likert scale, with each item scoring between 1 (Strongly Disagree) and 7 (Strongly Agree). The instrument, originally developed for daily testing, was used in the Hungarian validation study and in several Hungarian studies to ask about general perception ("Please tick the answer that best describes how you feel about the way you and your partner have interacted as parents in the last two weeks!"). The scale showed good internal consistency in the original study ($\alpha = .88$ and $.87$ for mothers and fathers, respectively) and also in the present D-COP-HU dataset ($\alpha = .89$).

The *Experiences with Coparenting Scale (ECS)* is a short instrument constructed and introduced by Beckmeyer et al. (2017), specifically assessing divorced or separated parents' satisfaction with their coparental relationship. The ECS consists of 11 pairs of bipolar adjectives (e.g., rigid-flexible; conflictual-peaceful). Each pair can be rated using a 7-point semantic differential scale. ECS had high internal reliability ($\alpha = .95$) in the original (Beckmeyer et al., 2017), and in this study with ECS-HU, as well ($\alpha = .94$).

Data Analyses

Confirmatory factor analysis (CFA) was conducted using Amos 21.0 with maximum likelihood estimations. The data obtained from 381 respondents did not satisfy the requirement of multivariate normality, therefore we used the AMOS non-parametric bootstrap option for further analyses (Walker & Smith, 2016). The Chi-square Test is a reasonable measure of fit with smaller samples (75–200 cases), but for models with more cases, the test is significant most of the time (Kenny, 2012). For this reason, we used alternative measures of fit. Three goodness-of-fit statistics were examined: χ^2/df ratio, the Comparative Fit Index (CFI), and the Root Mean Square Error of Approximation (RMSEA). According to Hu & Bentler (1999), a χ^2/df ratio below 3 and an RMSEA below .05 indicate a good fit, CFI above .95 indicates a great fit, while RMSEA between .05 and .10, CFI between .90 and .95 mean a moderate fit. We tested different models: 1) general, 2) first ordered, 3) second ordered models of CRS-HU, 4) individual subscales separately, and 5) a general model of B-CRS-HU. We tried to improve the fit of the models in two ways: 1) adding a reversed item method factor, and 2) correlating the error terms based on

the analysis of the modification indices. Following the CFA, internal consistencies of CRS-HU, of B-CRS-HU, and each subscale were examined separately, and correlations were estimated between CRS and other coparenting measures to examine convergent and discriminant validities. Because of the non-normal distributions of CRS subscales, we calculated Spearman correlations.

Results

Construct Validity – Confirmatory Factor Analyses (CFAs)

To confirm the theoretical structure of the construct, we tested five different models in CFA. The fit indices of these models are shown in [Table 3](#). In neither case did the reversed-item method factor improve the fit of the models, so we did not apply it to the models presented below.

Table 3. Model Fit of Different Models

	χ^2/df ratio	RMSEA	CFI	No. of iteration
Model 1	4.211	.092	.750	10
Model 2	2.328	.059	.898	13
Model 3	2.534	.064	.883	10
Model 4a	1.864	.048	.996	7
Model 4b	1.883	.048	.992	8
Model 4c	2.537	.064	.983	7
Model 4d	1.361	.031	.999	8
Model 4e	2.643	.066	.993	10
Model 4f	2.34	.059	.978	8
Model 5	2.214	.057	.962	11

Note. Model 1 – General model of CRS-HU; Model 2 – Second ordered model of CRS-HU; Model 3 – First ordered model of CRS-HU; Model 4 – individual subscales separately; Model 5 – General model of B-CRS-HU.

Model 1: First, a CFA was performed including the 35 items of CRS-HU in a model with one general factor. The model fit was poor, and the addition of residual covariances did not effectively change the fit parameters.

Model 2: We also tested the seven-factor theoretical structure based on the original instrument with a second-order factor of general coparenting. After adding residual covariances, the model fit was moderate, with factor loadings between .30 and .92. The direction of the relationship between the latent variables of the subscales and the general latent variable of coparenting supported the theoretical model: coparenting undermining (-.815); exposure to conflict (-.626); coparenting agreement (.800); coparenting closeness (.952); coparenting support (.952); endorse partner's parenting (.811); and division of labor (.663).

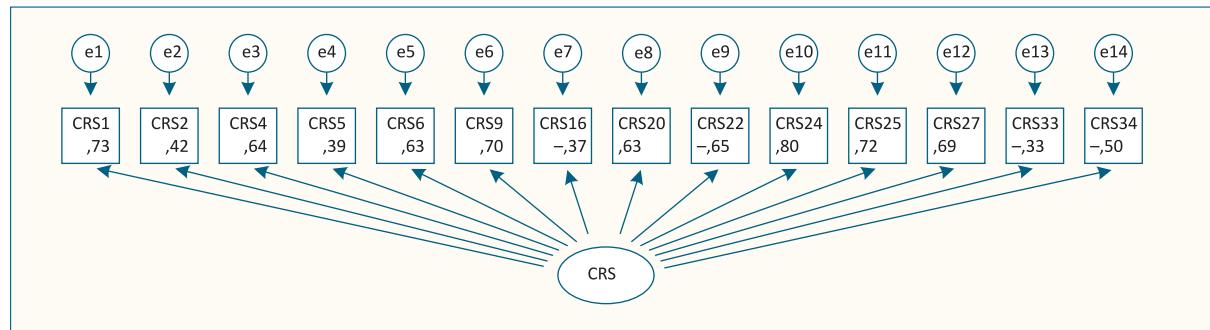
Model 3: We removed the second-order factor of general coparenting from the model and correlated the latent variables of the subscales. The model fit was moderate after adding residual covariances.

Model 4: The factors were examined separately because in previous research we came across the separate use of each subscale (Feinberg et al., 2020; Lamela et al., 2016; Lamela et al., 2020). We did not examine the Division of Labor subscale separately because of the low number of items. Each of the six subscales demonstrated a good or excellent model fit.

Model 5: The brief version of CRS-HU (14 items) had a good fit in the general model (which is parallel to Model 1 without using subscales), with factor loadings between .33 and .80 (See [Figure 1](#)).

In further analyses, we focused on Model 1 and Model 5, as well as on the separately defined subscales. Although the fit indices for Model 1 were not satisfactory, we considered it important to include this model to ensure comparability with previous studies. In contrast, Models 2 and 3, which exhibited a poor fit, were excluded from further examination.

Figure 1.



Note. In the figure, the factor loadings are shown in the squares. Items 16, 22, 33, and 34 are not listed as reverse items in the original article, but their content clearly indicates they are. For further details, see the Discussion section.

Internal Consistency

The internal consistencies of the CRS-HU (35 items), the B-CRS-HU (14 items), and six subscales were assessed by Cronbach's alphas and McDonald's omegas. The Division of Labor was examined with Spearman correlation because it contains only two items. Internal consistencies were "good" or "excellent" with Cronbach's alphas and McDonald's omegas ranging from .75 to .89 (Table 4).

Table 4. Descriptive Statistics and Cronbach's α of CRS and CRS-HU ($N = 381$)

	CRS Hungarian version ($N = 381$)				CRS original study (Mother; Wave 2; $N = 156$) (Feinberg et al., 2012)		
	Cronbach's α	McDonald's omega	M	SD	Cronbach's α	M	SD
Full version (35)	.82	.85	4.85	.84	.94	4.89	.83
Brief version (14)	.87	.88	4.87	.85	.88	4.91	.84
Coparenting Agreement (4)	.77	.78	4.96	1.03	.66	4.90	.99
Coparenting Support (6)	.89	.88	4.49	1.38	.88	4.63	1.33
Coparenting Closeness (5)	.78	.78	4.61	1.18	.83	4.78	1.16
Exposure to Conflict (5)	.87	.87	1.07	.89	.89	.89	.94
Coparenting/Undermining (6)	.75	.75	.53	.78	.83	.59	.77
Endorse Partner's Parenting (7)	.85	.86	4.87	1.02	.88	4.83	1.12
Division of Labor (2)*	$r_s(381) = .52^{**}$		4.26	1.58	$r(148) = .44$	4.09	1.57

Note. * Because of the low number of items, correlation was calculated instead of Cronbach alpha.

** r_s : Spearman correlation.

Convergent and Discriminant Validity

Correlations between the CRS-HU subscales and constructs similar to the CRS were examined to assess convergent and discriminant validity. Table 5 shows that Spearman correlations between the independent scales (D-COP-HU and ECS-HU) as well as the CRS-HU and its subscales ranged between .46 and .81. Between the CRS-HU's full and brief versions, we found very strong correlation ($r_s(381) = .97, p < .01$). The D-Cop-HU measure showed a higher association with CRS-HU ($r_s(381) = .81, p < .01$), than ECS-HU, although in the latter, it was also quite strong ($r_s(381) = .68, p < .01$).

Table 5. Spearman Correlations Between CRS-HU and Other Coparenting Measures (N = 381)

	1.	2.	3.	4.	5.	6.	7.	8.	9.	10.	11.
1. Full CRS-HU											
2. Brief CRS-HU	.97**										
3. Coparenting Agreement	.70**	.66**									
4. Coparenting Support	.85**	.83**	.56**								
5. Coparenting Closeness	.76**	.76**	.45**	.60**							
6. Exposure to Conflict	-.63**	-.57**	-.44**	-.45**	-.44**						
7. Coparenting Undermining	-.71**	-.65**	-.55**	-.58**	-.46**	.47**					
8. Endorse Partner's Parenting	.77**	.75**	.46**	.58**	.49**	-.34**	-.47**				
9. Division of Labor	.63**	.67**	.37**	.40**	.40**	-.29**	-.41**	-.60**			
10. D-COP-HU	.81**	.79**	.66**	.62**	.63**	-.56**	-.61**	.59**	.63**		
11. ECS-HU	.68**	.66**	.56**	.54**	.57**	-.48**	-.50**	.52**	.46**	.66**	1

Note. ** p < .01.

Table 6. Associations Between CRS and Sociodemographic Background Variables

	M (SD)	Sig. of Kruskal-Wallis/ Mann-Whitney test	Effect size (η^2/f)
Age		.664	.002
Under 30 years	4.84 (.75)		
31–40 years	4.87 (.85)		
Over 40 years	4.81 (.88)		
Education		.019	-.12
Secondary education	4.64 (1.02)		
Higher education	4.90 (.84)		
Type of partnership		.061	-.05
Marriage	4.88 (.80)		
Cohabitation	4.68 (1.05)		
Age of the oldest child		.190	.014
Under 6 years	4.73 (.82)		
7–12 years	4.83 (.82)		
Over 13 years	4.94 (.88)		
Age of the youngest child		.035	.018
0–1 years	4.99 (.72)		
2–3 years	4.73 (.96)		
4–6 years	4.78 (.81)		

CRS-HU and Socioeconomic Background Variables

Kruskal-Wallis and Mann-Whitney U tests were used to determine whether differences in the CRS score existed between various groups of participants (Table 6).

There were no significant differences in subgroups of parents' age, education, type of partnership and age of oldest child. We found a significant effect for the age groups of the children, $\chi^2(2) = 6.694$, $p = .035$. Subsequent pairwise comparisons were performed using Dunn's (1964) procedure with a Bonferroni correction for multiple comparisons. These post-hoc analyses revealed statistically significant differences in CRS-HU scores for mothers with the youngest children's age group ($M = 3.4$; $SD = .46$; mean rank = 208.15) compared to mothers

with 2–3-year-old ($M = 3.31$; $SD = .61$; mean rank = 178.93) ($p = .028$) and 4–6-year-old ($M = 3.31$; $SD = .52$; mean rank = 177.92) ($p = .031$) children. Mothers with higher education had a higher CRS-HU score ($Mdn = 3.48$) than those with secondary education ($Mdn = 3.31$), ($U(N_{\text{secondary}}=68, N_{\text{higher}}=313) = 8715.5, z = -2.338, p = .019$).

Discussion

This study's results indicate that the Hungarian version of the CRS (CRS-HU) is a reliable and valid instrument for the measurement of coparenting in a Hungarian-speaking context. Our data and CFA results suggest that the brief version (B-CRS-HU) and the six separate subscales are suitable for use; however, the full CRS-HU scale as a single factor showed a low fit and should be treated with caution despite its good internal consistency.

Positive correlations between the Hungarian versions of CRS, D-COP, and ECS indicate convergent (congruent) validity, which is consistent with previous results (McDaniel et al., 2017). A methodological and practical issue concerns the way the scale scores are calculated. The original (Feinberg et al., 2012) and several other studies (Camisasca et al., 2019; Lamela et al., 2020) used the mean scores to evaluate the CRS scale and subscales. We found only one exception among previous studies (Abbass-Dick et al., 2015), where an aggregated score of all items (ranging from 0 to 210) was calculated, with higher scores indicating higher levels of positive coparenting. When the instrument is used for screening or clinical monitoring rather than for research purposes, the aggregation method can be easier and more interpretable than calculating an average score.

In the present study, the internal consistency of each subscale was excellent or good ($\alpha = .75\text{--}.89$), while in previous studies, some subscales showed a lower reliability. In the original study (Feinberg et al., 2012), in the Brazilian (Carvalho et al., 2018), and the Portuguese (Lamela & Jongenelen, 2018) versions, the coparenting agreement subscale had the lowest internal consistency; nonetheless, several studies use this subscale even on its own (Roskam et al., 2018; Teti et al., 2015). Among the subscales, Coparenting Closeness and Division of Labor became subjects of conceptual and methodological criticism. Compared to the other subscales, the Division of Labor subscale consists of only two items, which suggests a kind of methodological "separation". While for other subscales, we can measure scale reliability by Cronbach's alpha, here we can only use a correlation coefficient. We did not analyze Division of Labor as a separate subscale (Model4); the factor loadings of the other models seem to work in a similar way to the items of the other subscales. Nevertheless, we believe that using a Division of Labor subscale should be strongly considered when examining families at different life stages: we can observe a completely different division of labor in newlywed couples, parents with newborns and older children, or divorced couples. As another criticism, several studies (Ferraro et al., 2018; Lamela et al., 2016) have suggested that the Coparenting Closeness subscale refers to relationship quality rather than to coparenting; therefore, the use of the subscale can be inadequate for divorced parents.

In studies using CRS, we come across many variations of it: full and brief versions, and separate subscales. This diversity shows that CRS and its separate subscales can be used to study coparenting or some of its aspects, which the results of our research also confirmed.

Items 16, 22, 33, 34 are not reversed in the original article, but their content clearly indicates that they actually are. ("My partner tries to show that she or he is better than me at caring for our child." (16); "My partner undermines my parenting." (22); "Do you argue about your relationship or marital issues unrelated to your child, in the child's presence?" (33); "Does one or both of you say cruel or hurtful things to each other in front of the child?" (34)). In Figure 1, we have intentionally presented the reverse of the original to highlight this omission. Based on the content of the items, they were negatively loaded in the model.

Although many studies have been conducted on coparenting using the CRS, few data exist on correlations with sociodemographic variables. Mikolajczak et al. (2018) pointed out that sociodemographic factors play a much smaller role in parental burnout than factors related to parenting and family functioning. Consistent with the results of previous studies, we found no association between sociodemographic background variables and CRS, except for the age of the youngest child.

In conclusion, although our work proves to us the full CRS-HU's good internal consistency, we recommend some caution because the factor structure does not fit properly into our Hungarian data. The brief version and the individual subscales can be used with greater confidence.

Strengths and Limitations

This research is significant for several reasons. First, so far, no established method has been established yet for measuring this construct in Hungary, which has limited the ability to connect with the international research discourse. With this study, we address this gap, enabling Hungarian researchers to align with global standards and contribute to international discussions. The instrument we have developed provides a solid foundation not only for academic research but also for clinical applications in the Hungarian context.

We offer the tool in several versions to meet diverse research and professional needs: a full-scale version, a shortened version, and options focusing on specific subscales. This flexibility ensures that the instrument can be adapted to a variety of research purposes and practical applications, enhancing its utility in both academic and applied settings.

On the other hand, several limitations of the study should also be noted. First, our sample is specific in terms of gender and education: only women participated, and women with higher education were overrepresented. A further testing of the instrument on a representative sample or other specific target groups would be essential. Since the study of coparenting dynamics inherently requires the perspectives of both partners, future research should include men to provide a more balanced and comprehensive understanding of coparenting.

Additionally, we utilized convenience sampling with a snowball method. Testing the instrument on a representative sample would allow for establishing Hungarian scale standards, which would benefit both clinical work and research. Finally, due to the study's cross-sectional design, we did not measure coparenting dynamics over time, nor did we assess the temporal stability of the questionnaire through a test-retest structure. Future longitudinal research is needed to address these limitations.

Conclusion, Implications and Future Directions

This study represents a significant milestone in coparenting research through validating the Hungarian version of the Coparenting Relationship Scale (CRS-HU). The results confirm the reliability and validity of the CRS-HU and its brief version (B-CRS-HU) as tools for assessing coparenting dynamics in Hungarian-speaking populations. The individual subscales also provide valuable flexibility for targeted investigations of specific coparenting dimensions.

The CRS-HU offers opportunities for Hungarian researchers and practitioners to align with international standards and contribute to global discourse on coparenting. Its practical applications extend to clinical interventions, where it can be used to assess and improve coparenting relationships in diverse family contexts. The availability of multiple versions enhances its adaptability across various research and applied settings.

Future research should prioritize testing the CRS-HU with male participants to gain a more balanced and comprehensive understanding of coparenting dynamics. The inclusion of fathers is particularly critical given the dyadic nature of coparenting and thus, the necessity of capturing both parents' perspectives. Longitudinal studies are also essential to examine the instrument's temporal stability and better understand the developmental trajectories of coparenting relationships over time.

Additionally, further validation studies involving representative samples of diverse family structures — such as blended families, separated parents, and non-traditional households — would broaden the instrument's applicability. Establishing Hungarian normative data would also enhance the utility of the CRS-HU in both research and clinical contexts. Integrating the CRS-HU with other measures of family functioning could yield deeper insights into the systemic interconnections within families and their impact on child outcomes.

Finally, as few international validation studies of the CRS exist, our work also contributes to the broader effort to enable cross-cultural comparisons and to examine the cultural validity of the construct and the instrument. By doing so, we aim to inspire further research and validation analyses in other cultures and countries, advancing the global understanding of coparenting dynamics.

In conclusion, the CRS-HU provides a solid foundation for advancing coparenting research and practice in Hungary. Testing the instrument with a more diverse range of participants, particularly men, will be an essential step in ensuring its comprehensive applicability and relevance in capturing the dynamics of coparenting relationships.

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Author contribution

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Declaration of interest statement

The authors have no conflicts of interest to disclose.

Ethical statement

This manuscript is the authors' original work.

All participants engaged in the research voluntarily and anonymously.

Their data are stored in coded materials and databases without personal data.

The studies involving human participants were reviewed and approved by the Research Ethics Committee of Semmelweis University, Budapest, Hungary (license number: RKEB 143/219).

Data availability statement

Datasets presented in this article are available in a publicly accessible repository: coparenting_pilot_final.sav
https://osf.io/2ynux/?view_only=2f86501fdbff490fbaf328894f38d60d

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References

Abbass-Dick, J., Stern, S. B., Nelson, L. E., Watson, W., & Dennis, C.-L. (2015). Coparenting breastfeeding support and exclusive breastfeeding: A randomized controlled trial. *Pediatrics*, 135(1), 102–110. <https://doi.org/10.1542/peds.2014-1416>

Antawati, D. I., & Purnomo, B. R. (2023). Indonesian translation and validation of Co-Parenting Relationship Scale Brief Version (Brief-CRS). *Qubahan Academic Journal*, 3(4), 342–351. <https://doi.org/10.58429/qaj.v3n4a183>

Archer-Kuhn, B., Saini, M., Hughes, J., Tam, D., & Trudgill, D. I. N. (2023). A survey of mothers' experiences of shared parenting and domestic violence. *Family Court Review*, 61(2), 395–412. <https://doi.org/10.1111/fcre.12715>

Barzel, M., & Reid, G. J. (2011). A preliminary examination of the psychometric properties of the Coparenting Questionnaire and the Diabetes-Specific Coparenting Questionnaire in families of children with type I diabetes. *Journal of Pediatric Psychology*, 36(5), 606–617. <https://doi.org/10.1093/jpepsy/jsq103>

Beckmeyer, J. J., Coleman, M., & Ganong, L. H. (2014). Postdivorce coparenting typologies and children's adjustment. *Family Relations*, 63(4), 526–537. <https://doi.org/10.1111/fare.12086>

Beckmeyer, J. J., Ganong, L. H., Coleman, M., & Markham, M. S. (2017). Experiences with Coparenting Scale: A semantic differential measure of postdivorce coparenting satisfaction. *Journal of Family Issues*, 38(10), 1471–1490. <https://doi.org/10.1177/0192513x16634764>

Camisasca, E., Miragoli, S., & Di Blasio, P. (2014). Is the relationship between marital adjustment and parenting stress mediated or moderated by parenting alliance? *Europe's Journal of Psychology*, 10(2), 235–254.
<https://doi.org/10.5964/ejop.v10i2.724>

Camisasca, E., Miragoli, S., Di Blasio, P., & Feinberg, M. (2019). Co-parenting mediates the influence of marital satisfaction on child adjustment: The conditional indirect effect by parental empathy. *Journal of Child and Family Studies*, 28, 519–530.
<https://doi.org/10.1007/s10826-018-1271-5>

Carvalho, T. R., Barham, E. J., de Souza, C. D., Böing, E., Crepaldi, M. A., & Vieira, M. L. (2018). Cross-cultural adaptation of an instrument to assess coparenting: Coparenting Relationship Scale. *Psico-USF*, 23(2), 215–227.
http://www.scielo.br/scielo.php?script=sci_arttext&pid=S1413-82712018000200215&nrm=iso

Cox, M. J., & Paley, B. (2003). Understanding families as systems. *Current Directions in Psychological Science*, 12(5), 193–196.
<https://doi.org/10.1111/1467-8721.01259>

Danis, I., Gervai, J., & Pilinszki, A. (2019). The Hungarian translation of the Coparenting Relationship Scale. Available here: https://semmelweis.hu/mental/files/2025/02/Feinberg_Coparenting_Relationship_Scale_HU-1.pdf

Dumitriu, C. G., Dudu, A., & Butac, L. M. (2022). Validation of the Romanian version of coparenting relationship scale. *International Research Journal of Public and Environmental Health*, 9(1), 24–34.
<https://doi.org/10.15739/irjpeh.22.004>

Dunn, O. J. (1964). Multiple comparisons using rank sums. *Technometrics*, 6(3), 241–252.
<https://doi.org/10.1080/00401706.1964.10490181>

Favez, N., Tissot, H., Golay, P., Max, A., Feinberg, M. E., & Bader, M. (2021). French adaptation of the Coparenting Relationship Scale: A scale for the assessment of the interparental relationship. *European Journal of Psychological Assessment*, 37(6), 433–439.
<https://doi.org/10.1027/1015-5759/a000633>

Feinberg, M. E. (2003). The internal structure and ecological context of coparenting: A framework for research and intervention. *Parenting: Science and Practice*, 3(2), 95–131.
https://doi.org/10.1207/S15327922PAR0302_01

Feinberg, M. E., Boring, J., Le, Y., Hostetler, M. L., Karre, J., Irvin, J., & Jones, D. E. (2020). Supporting military family resilience at the transition to parenthood: A randomized pilot trial of an online version of family foundations. *Family Relations*, 69(1), 109–124.
<https://doi.org/10.1111/fare.12415>

Feinberg, M. E., Brown, L. D., & Kan, M. L. (2012). A multi-domain self-report measure of coparenting. *Parenting: Science and Practice*, 12(1), 1–21.
<https://doi.org/10.1080/15295192.2012.638870>

Ferraro, A. J., Lucier-Greer, M., & Oehme, K. (2018). Psychometric evaluation of the Multidimensional Co-Parenting Scale for dissolved relationships. *Journal of Child and Family Studies*, 27, 2780–2796.
<https://doi.org/10.1007/s10826-018-1124-2>

Finzi-Dottan, R., & Cohen, O. (2014). Predictors of parental communication and cooperation among divorcing spouses. *Journal of Child and Family Studies*, 23, 39–51.
<https://doi.org/10.1007/s10826-012-9684-z>

Garcia-Huidobro, D., Diaspro-Higuera, M. O., Palma, D., Palma, R., Ortega, L., Shlafer, R., Wieling, E., Piehler, T., August, G., Svetaz, M. V., Borowsky, I. W., & Allen, M. L. (2019). Adaptive recruitment and parenting interventions for immigrant Latino families with adolescents. *Prevention Science*, 20(1), 56–67.
<https://doi.org/10.1007/s11121-018-0898-1>

Gillis, A., & Roskam, I. (2019). Development and validation of the Partner Parental Support Questionnaire. *Couple and Family Psychology: Research and Practice*, 8(3), 152–164.
<https://doi.org/10.1037/cfp0000123>

Gillis, A., & Roskam, I. (2020). Regulation between daily exhaustion and support in parenting: A dyadic perspective. *International Journal of Behavioral Development*, 44(3), 226–235.
<https://doi.org/10.1177/0165025419868536>

Goldenberg, I., Stanton, M., & Goldenberg, H. (2017). *Family therapy: An overview* (9th ed.). Cengage Learning.

Hu, L.-T., & Bentler, P. M. (1999). Cutoff criteria for fit indexes in covariance structure analysis: Conventional criteria versus new alternatives. *Structural Equation Modeling: A Multidisciplinary Journal*, 6(1), 1–55.
<https://doi.org/10.1080/10705519909540118>

Ju, J., Ye, P., & Bian, Y. (2023). Psychometric properties of the Coparenting Relationship Scale in Chinese parents. *Family Relations*, 72(4), 1694–1708.
<https://doi.org/10.1111/fare.12746>

Kenny, D. A. (2024, October 6). *Measuring Model Fit*. <http://davidakenny.net/cm/fit.htm>

Konold, T. R., & Abidin, R. R. (2001). Parenting alliance: A multifactor perspective. *Assessment*, 8(1), 47–65.
<https://doi.org/10.1177/107319110100800105>

Lamela, D., Castro, M., & Figueiredo, B. (2013). Parenting alliance measure: A Portuguese validation and development of a short-form version. *Archives of Clinical Psychiatry*, 40(6), 215–219.
<https://doi.org/10.1590/S0101-60832013000600002>

Lamela, D., Figueiredo, B., Bastos, A., & Feinberg, M. (2016). Typologies of post-divorce coparenting and parental well-being, parenting quality and children's psychological adjustment. *Child Psychiatry & Human Development*, 47, 716–728.
<https://doi.org/10.1007/s10578-015-0604-5>

Lamela, D., Figueiredo, B., Jongenelen, I., Moraes, A., & Simpson, J. A. (2020). Coparenting and relationship satisfaction in mothers: The moderating role of sociosexuality. *Archives of Sexual Behavior*, 49, 861–870.
<https://doi.org/10.1007/s10508-019-01548-2>

Lamela, D., & Jongenelen, A. M. I. (2018). Validação psicométrica da Escala da Relação Coparental em mães portuguesas [Psychometric randomization of the Coparental Relationship Scale in Portuguese mothers]. *Avances en Psicología Latinoamericana*, 36(3), 585–600.
http://www.scielo.org.co/scielo.php?script=sci_arttext&pid=S1794-47242018000300585&nrm=iso

Láng, A. (2018). Mama Mach and Papa Mach: Parental machiavellianism in relation to dyadic coparenting and adolescents' perception of parental behaviour. *Europe's Journal of Psychology*, 14(1), 107–124.
<https://doi.org/10.5964/ejop.v14i1.1474>

Lee, J.-K., Feinberg, M. E., & Wells, M. B. (2021). The Swedish Brief Coparenting Relationship Scale: Psychometrics and concurrent validity among primiparous and multiparous fathers. *Family Relations*, 70(3), 823–839.
<https://doi.org/10.1111/fare.12503>

Margolin, G., Gordis, E. B., & John, R. S. (2001). Coparenting: a link between marital conflict and parenting in two-parent families. *Journal of Family Psychology, 15*(1), 3–21. <https://doi.org/10.1037/0893-3200.15.1.3>

McDaniel, B. T., Teti, D. M., & Feinberg, M. E. (2017). Assessing coparenting relationships in daily life: The Daily Coparenting Scale (D-Cop). *Journal of Child and Family Studies, 26*, 2396–2411. <https://doi.org/10.1007/s10826-017-0762-0>

McHale, J. P. (1995). Coparenting and triadic interactions during infancy: The roles of marital distress and child gender. *Developmental Psychology, 31*(6), 985–996. <https://doi.org/10.1037/0012-1649.31.6.985>

Mikolajczak, M., Raes, M.-E., Avalosse, H., & Roskam, I. (2018). Exhausted Parents: Sociodemographic, Child-Related, Parent-Related, Parenting and Family-Functioning Correlates of Parental Burnout. *Journal of Child and Family Studies, 27*(2), 602–614. <https://doi.org/10.1007/s10826-017-0892-4>

Minuchin, S. (1974). *Families and family therapy*. Harvard University Press.

Pedro, M. F., & Ribeiro, M. T. (2015). Portuguese adaptation of the coparenting questionnaire: Confirmatory factor analysis, validity and reliability. *Psicologia, Reflexão e Crítica, 28*(1), 116–125. <https://doi.org/10.1590/1678-7153.201528113>

Pruett, M. K., Alschech, J., & Saini, M. (2021). The impact of coparenting on mothers' COVID-19-related stressors. *Social Sciences, 10*(8), Article 311. <https://doi.org/10.3390/socsci10080311>

Roskam, I., Brianda, M.-E., & Mikolajczak, M. (2018). A step forward in the conceptualization and measurement of parental burnout: The Parental Burnout Assessment (PBA). *Frontiers in Psychology 9*, Article 758. <https://doi.org/10.3389/fpsyg.2018.00758>

Saini, M., Pruett, M. K., Alschech, J., & Sushchyk, A. R. (2019). A pilot study to assess coparenting across family structures (CoPAFS). *Journal of Child and Family Studies, 28*, 1392–1401. <https://doi.org/10.1007/s10826-019-01370-3>

Sherrard, A., & Tan, C. C. (2022). Feeding coparenting: Associations with coercive control, structure-based, and autonomy-promoting food parenting. *Appetite, 170*, Article 105879. <https://doi.org/10.1016/j.appet.2021.105879>

Tan, C. C., Lumeng, J. C., & Miller, A. L. (2019). Development and preliminary validation of a feeding coparenting scale (FCS). *Appetite, 139*, 152–158. <https://doi.org/10.1016/j.appet.2019.04.020>

Teti, D. M., Crosby, B., McDaniel, B. T., Shimizu, M., & Whitesell, C. J. (2015). X. Marital and emotional adjustment in mothers and infant sleep arrangements during the first six months. *Monographs of the Society for Research in Child Development, 80*(1), 160–176. <https://doi.org/10.1111/mono.12150>

Teubert, D., & Pinquart, M. (2011). The coparenting inventory for parents and adolescents (CI-PA). *European Journal of Psychological Assessment, 27*(3), 206–215. <https://doi.org/10.1027/1015-5759/a000068>

Zimmermann, G., Antonietti, J.-P., Sznitman, G. A., Petegem, S. V., & Darwiche, J. (2022). The French version of the coparenting inventory for parents and adolescents (CI-PA): Psychometric properties and a cluster analytic approach. *Journal of Family Studies, 28*(2), 652–677. <https://doi.org/10.1080/13229400.2020.1749714>

Von Bertalanffy, L. (1968). *General System Theory: Foundations, development, applications*. George Braziller.

Walker, D. A., & Smith, T. J. (2016). Computing robust, bootstrap-adjusted fit indices for use with nonnormal data. *Measurement and Evaluation in Counseling and Development, 0*(0). <https://doi.org/10.1177/0748175616671365>

REVIEW ARTICLE

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Navigating Global Family Diversity: Theory, Research, and Implications for Policy – A Narrative Review*

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Introduction: Families, as foundational social institutions, are undergoing significant transformations worldwide. Understanding these shifts is critical for researchers and policymakers seeking to support family well-being.

Aims: This study examines global family trends across marriage, cohabitation, divorce, parent-child relationships, and kinship patterns. It integrates theoretical perspectives with empirical data to assess both converging and diverging family dynamics.

Methods: We conducted a narrative review of peer-reviewed studies in multiple languages, utilizing translation tools where necessary. Studies were selected based on thematic relevance and geographic representation, focusing on research published since 2010 while allowing flexibility in underrepresented regions.

Results: Findings indicate that while family transformations are driven by modernization, economic development, and shifting gender norms, cultural and religious factors ensure distinct regional family patterns.

Conclusions: Family structures continue to evolve in response to global and local influences. Policies supporting family stability, social cohesion, and mental well-being are essential for sustaining strong family systems. Future research should further explore the role of policy in mediating family transitions across diverse cultural contexts.

Keywords: global family trends; family policy; social change; marriage, cohabitation, and divorce; kinship systems

Introduction

What we think of as “family” varies based on background, experiences, and culture. In some places, family means a nuclear form – two parents with their children; elsewhere, it may be an extended family with aunts, uncles, cousins, and grandparents. In other places, family may mean a chosen set of people with close ties.

Family remains a key social institution, despite changes. Although definitions vary, families are social groups bonded by blood (or adoption) and legal obligations – often via marriage – who share living spaces and whose lives are intertwined across economic, political, educational, social, and emotional domains. Not all families meet all these conditions, but they are generally recognizable because they meet most of them.

Because families are universal, studying them is essential. Families are the central decision-making units of society. Economists worry about GDP, demographers about fertility, policymakers about legislation, but families

* An extended draft of this article is available upon request from the first author.

decide where to live, how many children to have, and who attends school. Families decide how to take advantage of programs and policies aimed at them. Ignoring families often means policies do not have the intended effect. In other words, families are ignored at one's own peril.

This study synthesizes empirical research on global family trends, focusing specifically on marriage, cohabitation, divorce, parent-child relationships, and kinship patterns across world regions.

Global Family Trends

Understanding global family trends requires attention to both broad patterns of convergence and the persistent diversity shaped by geographic, cultural, economic, and religious factors. While many regions have experienced declining fertility, shifting gender roles, and changes in family formation, these trends manifest differently across distinct social and historical contexts (Stone & James, 2022). To capture this variation, the study adopts World Bank regional classifications with minor modifications to reflect sociopolitical realities. Notably, we differentiate between Asia and the Pacific to account for distinct sociohistorical and demographic trends. Overseas territories and collectivities are categorized based on their level of political and economic integration. For instance, U.S. territories such as Puerto Rico are grouped within Latin America and the Caribbean, while Hawaii is considered part of North America. Similarly, French Guiana is categorized under Europe due to its governance structure, whereas French Polynesia is classified under Oceania.

Gender and Family Dynamics

Changing gender ideologies drive global family change. The Gender Revolution (Goldscheider et al., 2015) unfolded as women entered the labor force in large numbers, disrupting traditional family structures due to greater economic, decision-making, and cultural power. This led to more divorce, less marriage, and fewer children as women gained access to educational and economic resources. Research suggests that more equitable gender roles within households may foster greater stability in family life and potentially increase fertility rates (Esping-Andersen & Billari, 2015).

Socioeconomic Development and Family Transformation

Economic development plays a crucial role in shaping family structures (Mokomane, 2012), particularly in low- and middle-income countries (LMICs). Change does not mean convergence; "persistent diversity with development" occurs as progress, shaped by local contextual and cultural factors, fashions family life distinctly. In sub-Saharan Africa, traditional family forms remain resilient despite rapid economic transformations (Pesando, 2019). In LMICs, family configurations vary widely, reflecting different partnership regimes, gender relations, and fertility patterns (Castro Torres et al., 2022). Marriage, marital childbearing, and extended family households remain the norm in the Middle East and North Africa (Doignon et al., 2023) and many parts of Asia (Raymo et al., 2023), sustaining the importance of structural changes and cultural characteristics in global family patterns.

Globalization and Family Patterns

Globalization has had a profound but non-uniform impact on family life (Ziehl, 2003); regional and cultural differences continue to shape family patterns. Globalization introduces new dynamics, mediated by local contexts, resulting in diverse family forms rather than a single, homogenized model. A cross-cultural analysis of family systems in 30 nations showed diversity and commonality of family dynamics, driven by psychological processes shaped by cultural and socio-economic factors, leading to diverse family forms (Georgas et al., 2006).

Marriage and Family Formation

Family diversity includes changes in marriage patterns, diverging across most LMICs (Pesando & Abufhele, 2019). Family change is uneven and multidirectional, with differences between rural and urban settings (Castro Torres et al., 2022), underscoring the importance of cultural and economic contexts. In Western societies, marriage is evolving, with increasing acceptance of cohabitation, delayed marriage, and alternative family forms, such as single-parent households, same-sex partnerships, and lifelong singlehood (Furstenberg, 2019). These changes reflect broader societal shifts, including greater individual autonomy and declining influence of traditional insti-

tutions. Traditional theories of family dynamics fail to account for these realities, necessitating a re-theorization that captures the interplay between structural and ideational factors, especially accounting for shifts in gender ideologies across the Western world (Esping-Andersen & Billari, 2015).

Migration, Urbanization, and Family Fragmentation

Migration and urbanization influence family dynamics by disrupting family arrangements. Urban living leads to smaller, nuclear families as city life makes extended family living less practical (Trask, 2022). The global urban population has increased from about 25% in 1950 to more than 50% today, a number that is only expected to rise in coming decades (UN Habitat, 2022).

Theoretical Perspectives on Family Diversity

Family structures and dynamics have always been part of the human experience across cultural, economic, and social contexts, driven by globalization, technological change, economic development, and shifting cultural norms. Traditional theories such as Modernization Theory, World Systems Theory, and Developmental Idealism have provided valuable insights into the mechanisms of family change (Inglehart & Baker, 2000; Thornton, 2005; Wallerstein, 1974). However, as societies become more interconnected yet retain distinct cultural identities, there is a need for a theoretical framework that synthesizes existing theories to explain the diverse patterns of family life worldwide. We propose a new model, the *Integrative Convergence-Divergence Model (ICDM)*, which builds on prior work and adds explanatory power to the motivations and drivers behind differing global family patterns.

The ICDM accounts for the simultaneous convergence and divergence of family patterns globally, driven by the interaction of global and local forces, by integrating key elements from existing theories, creating a fresh perspective that more fully accounts for the heterogeneity in family forms and functions observed worldwide. It offers a more comprehensive understanding of the forces shaping family dynamics. Below, we briefly overview the primary theories on which ICDM is based and then describe the ICDM in greater detail.

Prior Theories

These theoretical perspectives each highlight how broader societal transformations – from industrialization and global capitalist structures to shifts in values – can influence family formation, composition, and behavior.

Industrialization Theory posits that as societies industrialize, family patterns will converge to those seen in the West, focusing on how economic development is linked to family dynamics (Goode, 1963).

Developmental Idealism suggests that beliefs about modernity and development developed in the Western experience have become a global influence on family structures and behaviors. Under developmental idealism, Western ideas about family become global ideals because they are seen as both causes and consequences of social and economic development (Thornton, 2005), as education, media, and cross-national organizations help shape individuals' family aspirations.

World Systems Theory examines how global economic power structures shape family patterns by highlighting how capitalist systems make some family patterns more or less likely, particularly in peripheral and semi-peripheral countries, focusing on economic dependency and power imbalances (Wallerstein, 1974).

Second Demographic Transition Theory claims that in industrialized societies, an ideational shift toward post-materialist values has led to delayed (and less) marriage, more cohabitation, and lower fertility, clarifying how cultural shifts contribute to family convergence in relatively wealthy regions (Lesthaeghe, 2010).

Convergence and Divergence Theories are key and demonstrate that as countries develop and change, their family patterns may become more similar, whereas divergence theories suggest the opposite, emphasizing the important role of local contexts and the influence of traditions, religions, and cultural practices (Inglehart & Baker, 2000).

The Integrative Convergence-Divergence Model

We propose an integrative approach, the Integrative Convergence-Divergence Model (ICDM), which incorporates key insights from previous theories to better understand patterns of family change and similarity around the world. According to the ICDM, global family change reflects complex interactions between converging global

forces and diverging local contexts. ICDM acknowledges that family patterns shape and are shaped by myriad social forces, not limited to economic or ideational change. It acknowledges predominant trends toward similarity in family patterns, such as decreasing marriage rates and declining fertility, while emphasizing that strongly rooted local contexts produce diverging family patterns.

In terms of converging influences, ICDM recognizes that global forces like modernization, economic development, higher education levels, female labor force participation, and technological interconnectedness provide the energy to overcome prevailing family norms (Welzel & Inglehart, 2005). Economic prosperity is accompanied by more frequent nuclear family structures, delayed marriage, and more cohabitation, while the diffusion of individualistic values leads away from traditional, collectivist family dynamics toward more gender-egalitarian and individualistic relationships (Thornton, 2005). This occurs only to the extent individuals are in contact with such forces, explaining why researchers have observed large differences between rural and urban areas (Castro Torres et al., 2022), as cultural tradition and religious practices are often stronger in rural areas.

Furthermore, the global capitalist system shapes labor markets, migration, urbanization, and economic dependencies (Wallerstein, 1974), contributing to converging family patterns as individuals seek economic opportunity beyond their hometowns, leading to changes in both sending and receiving countries as transnational families navigate difficulties.

Not all influences are convergent. Local contexts are important due to proximity. Cultural traditions, religious beliefs, local political structures, and social praxis shape how families react to global diversity. In some countries, extended family networks remain central for cultural and economic reasons. Some scholars argue that the nuclear family is a historical aberration rather than the norm (Coontz, 2005). Extended kinship networks provide greater help with parenting, access to shared economic resources, and stronger social support (Glick, 2010). Examining local contexts means paying attention to religious beliefs and practices, linked to fertility rates and gender roles around the world, despite pressure from globalizing influences (Norris & Inglehart, 2004; Stone & James, 2022).

Similarly, researchers observe divergent patterns in how societies resist or reinterpret global norms like cohabitation and divorce; although rising globally, these terms can mean different things (Cherlin, 2009). In some parts, cohabitation is the first step toward traditional marriage, or a divorce may be mediated by kinship groups, leading to ambiguity about whether a divorce officially took place. These realities lead to policy contexts and legal frameworks that build upon local divergences, which can inhibit or accentuate global family diversity (Therborn, 2004).

While Convergence and Divergence Theory explains how a society's family patterns grow similar or remain distinct, it does not fully account for why these processes operate differently across contexts. The ICDM extends this perspective by incorporating insights from Modernization Theory, World Systems Theory, and Developmental Idealism to illustrate how global forces – such as economic development, media, and transnational organizations – interact with local institutions and cultural norms to shape diverse family outcomes. Additionally, it addresses within-country differences that Convergence and Divergence Theory tends to treat broadly, recognizing how socioeconomic inequalities, rural-urban divides, and cultural pluralism shape family patterns. This multilevel approach explains both converging trends, such as declining fertility and delayed marriage, and persisting or emerging divergences, like the resilience of extended kin networks or the continued power of religion to shape family life. By emphasizing how global influences are filtered through regional and community contexts, ICDM provides a more nuanced and comprehensive understanding of family change.

Additionally, the ICDM expands the focus beyond nation-states, consistent with Pesando (2019), to view global family diversity at the regional or larger level, while allowing for local idiosyncrasies. As Pesando (2019) states, "nation-states might be too small a unit to study changes in families" (p. 622) due to the interconnectedness of global economies, production mechanisms, technological advances, and media. Given increasing inequality within countries, studying family patterns at the national level may obscure family diversity. Integrating both converging and diverging processes with the ICDM allows for theoretical and empirical flexibility to study global family patterns, diversity, and change. In summary, the ICDM provides a comprehensive framework that integrates global and local influences to explain the diverse patterns of family life worldwide.

Methods

We identified relevant studies by reviewing published literature in English, French, Spanish, and Portuguese. When necessary, translation software (e.g., Google Translate, Microsoft Word, ChatGPT) was employed to facilitate access to sources in other languages.

Articles were selected based on relevance to study themes, with an eye toward geographic representation. While we enforced no strict publication period, preference was given to research published since 2010, although flexibility was required in regions where recent literature was sparse. Given the wide geographic scope of this review and the wealth of diversity across countries, we include selected examples to illustrate key trends and patterns rather than attempting an exhaustive account for each region.

Results

In the following sections, we outline how distinct world regions have experienced shifts in family life, focusing on marriage, cohabitation, divorce, parent-child relationships, and kinship structures. Each regional overview highlights key processes, dynamics, and changes shaping these family domains, setting the stage for an integrative understanding of both convergent and divergent patterns in contemporary family life.

Central Asia

The institution of the family in Central Asia is undergoing significant transformation due to cultural traditions, economic and technological change, and the aftermath of the Soviet empire. Urbanization, migration, and shifting gender roles have changed marriage practices, fertility rates, divorce trends, and family dynamics, redefining relationships and shaping family interactions.

Historically, marriage in Central Asia was family-arranged, especially in rural areas, where extended kinship networks dominated social life. Parts of these practices remain today in the form of Kyrgyzstani bride kidnapping, where between 1 in 6 and 1 in 4 rural marriages involve the nonconsensual abduction of the bride (Becker et al., 2017). Many still favor the practice due to its traditional roots, whereas others have linked nonconsensual abduction to psychological distress, lower marital satisfaction, higher divorce rates, and poor health outcomes for women and children (Borbieva, 2012).

While traditional marriage practices remain in rural areas, urban centers in Kazakhstan and Uzbekistan are seeing emphasis on love marriages due to modernization and increased numbers of women seeking education. Consequently, women seek greater decision-making control over their romantic partners (Dommaraju & Agadjanian, 2008). However, traditions such as patrilocal customs expect women to move into their husband's family home and care for their families-in-law, reinforcing patriarchal values (Nedoluzhko & Agadjanian, 2015). Women are expected to maintain household responsibilities even while pursuing employment (Kuehnast & Dudwick, 2004).

Rising divorce rates, particularly in urban areas in Kazakhstan and Kyrgyzstan, result from economic development, ideational changes, and women's growing autonomy among younger couples (Werner et al., 2018). Women are less reliant on men economically and increasingly able to leave unhappy marriages, despite strong stigmatization prevalent throughout the region, especially in rural areas (Spoorenberg, 2018). In these areas, societal pressure to maintain family ties remains strong, even in the presence of domestic conflict (Clifford et al., 2010).

Marital quality varies across the region. Marriages that begin as bride kidnappings tend to have lower levels of marital happiness and higher levels of intimate partner violence due to traditional gender norms and feeling trapped within such marriages (Borbieva, 2012). On the other hand, love marriages based on mutual consent report higher satisfaction and more equitable decision-making, especially in urban areas where female education and progressive gender norms are more common (Werner et al., 2018).

Collectivist values shape family patterns in Central Asia. Care for aging parents enjoys high social approval, and strong stigma is generated when children fail to do so, especially in rural areas where family networks influence marital, educational, and living decisions (UNICEF, 2021). Older children are expected to care for younger ones to enable adults to pursue economic necessities such as farm labor (Kuehnast & Dudwick, 2004).

An aspect specific to Central Asia is the large influence from Russia, where many labor migrants search for

employment. Labor migration influences family structure as men leave home, leaving women to manage caregiving and household responsibilities (Rahmonova-Schwarz, 2012). Children often suffer an emotional toll due to the prolonged absence of their parents. Migration empowers women to have greater household control and autonomy but often comes at the cost of economic hardship as they depend on remittances (Sagynbekova, 2017), which can reinforce traditional gender hierarchies.

As in many parts of the world, religion plays a significant role in family life in Central Asia. Despite Soviet efforts to minimize Islamic practices, Islamic traditions shape gender roles and family expectations, particularly in Uzbekistan and Tajikistan (Buckley, 1998). Religious leaders influence family planning decisions by speaking against contraception and encouraging large families (Spoorenberg, 2018). The persistence of polygamy owes its continuity to religious norms and cultural rites (Cleuziou & McBrien, 2021).

Thus, families in Central Asia encounter a diverse family landscape shaped by tradition and modernization, Eastern and Western influences. In urban areas, love marriages, increasing divorce rates, and women's growing education and autonomy signal cultural shifts. Rural areas remain tethered to arranged marriages, high fertility rates, and collectivist decision-making. Migration to find work continues to shape family structures, gender dynamics, and caregiving responsibilities. Religion exerts a powerful influence on families at both individual and societal levels.

East Asia

Recent decades in East Asia have seen rapid social, economic, demographic, and political change as industrialization, urbanization, and shifting cultural norms have transformed family dynamics. Countries such as China, Japan, South Korea, and Taiwan have witnessed changes in marriage, cohabitation, divorce, parent-child relationships, and kinship patterns. Family shifts have also been observed in the Philippines, Cambodia, and Thailand. Together these trends have redefined family life in the region.

Marriage maintains its central place in East Asian family formation despite shifts toward cohabitation, divorce, and singlehood. Declining marriage rates and rising age at first marriage have been observed in China, Japan, South Korea, and Taiwan. In China, the marriage rate declined from 9.9 to 4.8 per thousand between 2013 and 2022, with average age at first marriage approaching 30 (Luo, 2024). Similar patterns have been observed in Japan (Raymo et al., 2023). In South Korea, financial insecurity means many are delaying or forgoing marriage (Kim et al., 2012). The Philippines, Cambodia, and Thailand have experienced similar shifts (Abalos, 2023; Heuveline & Nakphong, 2023).

These changes in marital behavior can be tied to economic insecurity, especially in China, where accelerating housing and living costs and dowry practices place marriage out of reach, hitting rural areas acutely (Luo, 2024). Chinese norms dictate that men should be property owners prior to marriage, so many delay or forgo marriage. China's skewed sex ratio (with men outnumbering women), a remnant of the one-child policy, compounds this issue (Dyson, 2012). South Koreans face similar challenges with rising housing prices and high student debt (Kim et al., 2012). Economic concerns affect young adults in Thailand, where remarriage is becoming more common among women who can support themselves post-divorce (Pothisiri et al., 2023). Rising economic inequality and uncertain job prospects influence marriage decisions throughout the region (Park, 2021).

Beyond economics, women's increasing education and changing gender roles have reshaped marriage patterns. Filipino, South Korean, and Japanese women often prioritize careers over family as cohabitation becomes more accepted (Abalos, 2023; Park, 2021). Traditional norms create tension between career opportunities and caregiving responsibilities (Frejka & Gietel-Basten, 2016), leading to falling fertility rates due to delayed marriage (Cheng, 2020).

Cohabitation has become more accepted, particularly in urban areas, though less so than in Western societies (Mu, 2024). Taiwanese young adults see cohabitation as a more flexible option (Wang & Yang, 2023). Similar trends are observed in the Philippines and Cambodia, though it remains somewhat stigmatized (Abalos, 2023; Heuveline & Nakphong, 2023). These changes reflect broader shifts in family formation.

Divorce is becoming more common, more than doubling in China, from 0.96 (2000) to 3.1 (2020) to 2.0 (2022) per 1,000 population, despite a "cooling-off period" (Luo, 2024). Similar increases are observed in South Korea (Kim et al., 2012). Cambodia has reported greater acceptance of divorce, and Thailand has seen increases in remarriage rates (Heuveline & Nakphong, 2023; Pothisiri et al., 2023).

Shifting patterns in relationships have led to changes in family structures, as single-parent households, remarriage, and non-traditional family forms emerge. In Japan and the Philippines, rising divorce rates have led to more

single-parent households (Abalos, 2023; Raymo et al., 2023). In South Korea and Thailand, increasing remarriage challenges cultural norms (Pothisiri et al., 2023).

Parent-child relationships have evolved. In China, Japan, and South Korea, filial piety and respect for elders remain central (Sodei, 2004). However, industrialization and urbanization have weakened traditional influence as multigenerational households yield to nuclear ones. Japanese young adults are less likely to live with older parents (Sodei, 2004). This shift places greater pressure on social services as elder care responsibility transfers to the state. South Korea has implemented policies to address aging society needs, whereas Cambodian young adults continue to care for aging parents despite urban pressures (Heuveline & Nakphong, 2023).

Urbanization and economic development drive these changes. As families move to urban areas, traditional kinship influence wanes in favor of smaller, nuclear units (Raymo et al., 2023). Soaring costs make raising children challenging, leading to more people remaining single or having smaller families (Abalos, 2023; Kim et al., 2012; Luo, 2024).

To sum, families in East Asia are both beneficiary and casualty of complex changes. Changing marital patterns, increased acceptance of cohabitation and divorce, and declining marriage rates mean families experience greater uncertainty. Parent-child relationships are evolving as multigenerational households recede. Elder care, traditionally the domain of families, can be outsourced as urbanization and economic development transform the social landscape. The story of East Asian families is one of change and evolution.

South Asia

Like many parts of the world, the family is a core social institution across South Asia while undergoing significant social, demographic, political, and economic change. Patterns of marriage, cohabitation, divorce, and family dynamics have been influenced by cultural mores, social norms, globalization, urbanization, and debates about gender roles. Although characterized by a collectivist family outlook, where marriage and family are central to life, macro trends have influenced marriage, parent-child relationships, and intergenerational relationships.

Marriage remains central to family life yet is the focus of social change. Traditionally viewed as the union of two families rather than individuals, marriage has been seen in light of family and kinship dynamics such as caste, religion, socioeconomic status, and consolidation of power and honor (Jones & Yeung, 2014). In urbanized areas of the Indian subcontinent, especially India, love marriage is increasingly common as young people seek autonomy, although family involvement remains common (Vikram, 2024). Marriages in South Asia are increasingly the result of strong parental influence but ultimately the choice of individuals, a trend reflective of female education. In Pakistan and Bangladesh, marriage remains a key transition in a young person's life, and many women are still expected to marry early (Scott et al., 2021) if not pursuing higher education and lucrative careers (Ille & Rose, 2016).

Age at marriage differs across South Asia. In India and Nepal, age at marriage is climbing in urbanizing areas, whereas in rural ones, where child marriage persists, age at marriage appears stable or declining (Kamal & Ulas, 2020). Early marriage is also common in Afghanistan and Pakistan, especially rural regions, where traditional values and gender roles, combined with limited educational opportunities for women, ensure the practice endures. Child marriage in the region also means women suffer from limited job opportunities and poorer health outcomes (Scott et al., 2021), affecting family dynamics and economic mobility.

Despite the growing presence of love marriages, practices common in the West, such as cohabitation, remain rare. Cohabitation is still stigmatized due to religious taboos and cultural mores, even in urban centers where Western values are increasing in relevance (Jones & Yeung, 2014). Strong emphasis on kinship and elder relations means the stigma ensures cohabitation remains legally and socially controversial. Familial piety continues to be deeply interwoven with marriage and sexuality.

Divorce, though highly stigmatized in many parts of the region, is slowly gaining acceptance across South Asia, most commonly among highly educated populations in urban centers. In Sri Lanka and India, women's economic independence means women can resort to divorce if necessary, although it is still considered a last option given the societal importance of marriage (Dommaraju & Jones, 2011). In contrast, in countries with an Islamic emphasis on marriage, such as Afghanistan and Pakistan, divorce remains difficult or impossible due to traditional gender roles and societal opprobrium toward divorced women, making remarriage more difficult. However, divorce is increasingly available in cases of marital violence, marking growing societal acceptance of women's autonomy and the importance of equity in relationships (Jejeebhoy et al., 2014).

New research focuses on family dynamics such as marital quality, linked to children's wellbeing. In Nepal, studies show parental marital quality is linked to children's transition to adulthood by shaping expectations

for family life (Brauner-Otto et al., 2020). In India and Bangladesh, marital quality has been linked to mental health and family harmony (Chowbey, 2017). Intimate partner violence is common across South Asia, especially among married women (Jejeebhoy et al., 2014), driving down marital and relationship quality with influences on children and parent-child relationships, as women and children experience hostile family environments.

Parent-child interactions are changing as labor markets welcome more women and migration makes traditional family structures difficult to maintain. In many countries, it is common for one or both parents to work abroad, especially in Bangladesh and Sri Lanka, where many migrate overseas for better economic opportunities. In countries with limited social security systems, elderly parents depend on their children for support, creating a shift in intergenerational relations in places like China, Taiwan, and Singapur (Cheng, 2015). Migration strains filial piety as elderly parents, often left in rural areas due to high urban living costs, are cared for by other family members rather than their children. This shift influences family relations in countries where child-based elder care has been historically established (Chung et al., 2021).

In summary, families in South Asia are responding to and shaping rapid social change as traditional values meet modern influences. Marriage continues to occupy the primary place in family life yet is increasingly delayed. Family influence over marital choice is pervasive but gradually yielding to love marriages. Cohabitation and divorce, although rare and stigmatized, are becoming more common due to education and economic independence. Migration and urbanization create challenges and opportunities for families as South Asia's populations seek to maximize their wellbeing in a world shaped by modern changes undermining traditional approaches.

Middle East and North Africa

Family serves as the core social institution in the Middle East and North Africa, shaping individual identities, social relationships, and community sense. Families are deeply rooted in tradition and intertwined with dominant religions, primarily Islam but also Christianity and Judaism. Extended families sustain members emotionally, socially, and economically, enmeshing them in intergenerational kinship systems with deep involvement in personal affairs, collective decision-making, shared responsibility, and an enduring family reputation. Family facilitates cultural, religious, and moral transmission, leading to widely shared yet increasingly challenged understandings of gender roles and social mores, enabling it to serve as a key source for social cohesion and individual identity. Islamic principles continue to shape family and political life, while the pervasive role of religion is hotly debated throughout the region.

Marriage is central to family life but is in flux. Traditionally a key marker of adulthood arranged with strong familial influence, marriages today are delayed due to economic barriers. Islamic principles teach that marriage is sacred and roles of husbands and wives are complementary, but evolving social norms seek new applications as young adults navigate financial and social difficulties (Jarallah, 2022). Soaring living and housing costs coupled with pressures for high educational attainment make marriage inaccessible for some, resulting in "Waithood", where major decisions are deferred (Kovacheva et al., 2018). In conservative sectors, the importance of marriage remains entrenched, despite rising marital ages and declining but still high rates of consanguineous marriages (Sharkia et al., 2015). Where family ties and wealth preservation are emphasized, such as in Oman, consanguineous marriage remains common (Islam, 2012).

Cohabitation is largely stigmatized due to strong religious teachings prohibiting sexual relationships outside marriage, even criminalizing them in some countries. Some wealthier urban areas have shown signs of acceptance toward cohabitation among the educated class (Al-Hakami & McLaughlin, 2016; Kolman, 2018). Though rare and met with cultural resistance, this trend reflects a slow shift in how some segments of society approach relationships (Gilbert & Brik, 2022).

Divorce, though low by international standards, is becoming more prevalent as traditional views of lifelong marriage give way, even as divorce remains seen as a final resort under Islamic law. The United Arab Emirates' rising divorce rates signal changing social expectations and realities (Al Gharaibeh & Bromfield, 2012), often led by women seeking gender equality. Divorce's influence on child wellbeing is receiving greater attention. Saudi Arabian girls from divorced families struggle with interpersonal adjustment due to the psychological impact of divorce, linked to lower self-esteem and poorer social relationships (Al-Zamil et al., 2016). In Israel, divorce disproportionately affects women and the economically disadvantaged, widening the gap between rich and poor (Endeweld et al., 2022). Across the region, Islamic law and social norms intertwine, as individuals navigate divorce and its consequences.

Marital quality emerges from economic, gender, social, and religious influences as couples seek family harmony and gender complementarity, rather than the autonomy commonly sought in other regions. While becoming less

frequent, polygamy remains important, even if research has found it detrimental to Saudi women's marital satisfaction (Merdad et al., 2023). Families where fathers are involved report higher marital satisfaction and improved child outcomes, such as among Omani children who describe better emotional development and stronger family bonds (Baig et al., 2021).

Parent-child bonds remain strong because parents are heavily involved in their children's lives, shaped by cultural traditions, religious teachings, and filial piety. Parents influence children's educational and career goals. Jordanian parents promote children's critical thinking while grounded in traditional values like respect for Islamic principles (Al-Hassan & Rothenberg, 2021). The tension between autonomy and traditional values extends beyond Jordan as Qatari parenting styles emphasizing family cohesion are juxtaposed against children's independence (Ihmeideh, 2019).

In summary, families remain central even as marriage practices evolve, divorce rates rise, and many struggle with contemporary pressures. Marital quality, parent-child relationships, and kinship networks remain strong, as younger generations challenge traditional hierarchies while seeking to preserve family cohesion and religious traditionalism.

Oceania

In Oceania, families live across a vast geographic area and comprise a wide set of cultural traditions deeply embedded in historical and social landscapes. Family units are central to community life. In some areas, families are nuclear; in others, broader kinship networks prevail. Westernization, modernization, and urbanization have influenced family trends across marriage, cohabitation, divorce, parent-child relationships, and kinship patterns throughout this culturally diverse region.

Marriage has transformed in recent years. In East Timor, marriage-related exchanges reinforce social bonds and family identity, remaining influential despite modernization pressures (Silva, 2018). However, declining marriage rates and rising cohabitation are seen, as in Vanuatu, where adoption and child fostering respond to parental instability, leaving children in the care of extended family or trusted community leaders. Child fostering is sometimes used to strengthen social ties (Brandl et al., 2023). As traditional marriage and its rites are under strain, cohabitation becomes increasingly common as young couples opt for fewer formal constraints.

As marriage comes under pressure, divorce has become more common. In Papua New Guinea, divorce remains comparatively rare but is slowly becoming more common due to modernizing gender roles and search for greater gender equity (Stewart & Strathern, 2023). New Zealand has seen sharp increases in divorce, especially where social change and economic disadvantage burden marriage (Newton et al., 2024). Such shifts have consequences for the wellbeing of children and adults, contributing to changes in family structures.

Marital and family relationship quality, especially concerning intimate partner violence, is of increasing interest. Research shows attending to socioecological factors can buffer against violence and safeguard relationship quality (Bird et al., 2021). Father involvement in Papua New Guinea can protect against intimate partner violence, highlighting the interplay between masculine identities and parenting (Chan et al., 2017). Relationship quality depends on complex norms and expectations, leading to potential conflicts when traditional gender roles confront modern views on equality.

Parent-child relationships are challenged by migration due to economic pressure, leading to changing family situations with various caregivers (Brandl et al., 2023). Parental involvement in educational activities is positively correlated with children's developmental outcomes, especially among poor households (Sun et al., 2018). Conversely, economic and social disadvantages have strained parent-child relationships as parents navigate care-giving demands with educational and labor market expectations (Rarau et al., 2019).

Changes in intergenerational and kinship relationships are visible. In Micronesia, acceptance of modern family planning may lead to tensions between older and younger generations, as extended family systems accommodate shifting gender and reproductive norms (McDonald et al., 2024). Similar tensions are observed in Tonga, where older generations cling to traditional practices while younger generations seek individualistic financial wellbeing (Ongolea & Houkamau, 2024). Such tensions influence family dynamics, straining trust between family members.

Despite homogenizing influences from globalization and Westernization, many countries seek to preserve their cultural heritage. New Zealand emphasizes cultural heritage and community connection via retention of traditional knowledge among indigenous women, maintaining vibrant ethnic identities (Newton et al., 2024), leading to stronger intergenerational ties. While family dynamics are changing, efforts to preserve cultural practices allow families to bond and maintain social cohesion.

In conclusion, families in Oceania continue to value traditional practices while adapting to modern life and economic reality. Cohabitation and divorce are on the rise amidst changing gender roles, economic pressures, and migration. Parallel efforts to preserve cultural traditions maintain strong family bonds enabling families and societies to thrive.

Sub-Saharan Africa

Sub-Saharan Africa is a region where social and familial relationships constitute the basis of communal society. Families are viewed as the fundamental unit, and children are accorded high value. These realities mean individuals are embedded within support networks extending beyond the nuclear household. Family dynamics, shaped by tradition, religion, and socioeconomic conditions, interact with urbanization and economic development. Marriage, cohabitation, divorce, relationship quality, and parent-child relationships are evolving at different paces across this diverse region.

Marriage remains the lynchpin in social relationships, drawing upon rich cultural values and practices. Differing approaches to marriage, including legal, traditional, customary, and religious marriages, make specifying when one is considered married difficult because marriage is often a process rather than an event. Child marriage is common in some areas, such as Mali, where rates are increasing among the rural and urban poor (Batyra & Pesando, 2023), despite some progress due to recent government efforts aimed at reducing the practice. In Kenya, bridewealth practices continue nearly universally in rural and commonly in urban areas due to their symbolic creation of family ties (Chae et al., 2021).

Interethnic marriage has increased – about 20% of marriages occur between different ethnic groups (Crespin, 2019). Such trends are shown in Ghana, Gabon, and the Republic of Congo, where interethnic marriage is increasingly common despite lack of societal acceptance in some areas (Bandyopadhyay & Green, 2021).

Cohabitation is increasingly accepted, at least in rapidly growing cities. In South Africa, cohabitation has become an alternative to marriage, indicating changing approaches to traditional customs, as younger generations emphasize economic success and autonomy over long-term relationships amidst uncertain labor market prospects (Moore & Govender, 2013). Similar patterns are observed in Tanzania and Burkina Faso (Pesando, 2021).

Divorce has been rising, leading to declining union stability and effects on children's schooling because disruptions to the parental union can harm educational attainment (Odimegwu, 2020). Rising divorce rates suggest shifting social norms and conversations about gender roles as divorce becomes more accepted (Clark & Brauner-Otto, 2015).

Declining marital quality due to economic and social constraints contributes to relationship failures. In rural Niger, younger age at marriage is linked to lower satisfaction and participation in decision-making, leading to feelings of seclusion (Tomar et al., 2021). Traditional practices such as bridewealth are linked to poor outcomes when they take precedence over affection (Jensen, 2015).

Parent-child relationships are influenced by cultural norms surrounding family structure and parenting customs. In Senegal, child fostering reflects a commitment to the collective wellbeing of children and extended family. Despite potential benefits, this system may pose risks to children's health (Beck et al., 2015). The importance of children is also seen in strained marriages of couples struggling to conceive, destabilizing relationships (Fledderjohann, 2017).

Families often live in close proximity and experience pressure to provide support to extended kinship networks. In South Africa, grandparents often raise grandchildren when parents face financial difficulty or migrate (Mtshali, 2015), pulling children into extended family networks and creating strong intergenerational bonds.

Sub-Saharan African families remain at the core of society yet continue to endure profound changes as transformations sweep across the continent. Marriage remains key but practices like child marriage, interethnic unions, brideprice, and cohabitation challenge its supremacy. Union instability is common, as women seek autonomy and equity, challenging traditional gender roles. The family will likely remain a key site of social and political conflict as well as a rallying point.

Latin America and the Caribbean

Family dynamics in Latin America and the Caribbean are central to social organization, cultural identity, and economic activity. While traditional family structures remain central, the region is experiencing significant changes in marriage patterns, cohabitation, divorce, parent-child relationships, and kinship ties. These changes reflect broader shifts reshaping the family landscape.

Marriage rates have fallen as younger generations opt for alternative family patterns, particularly in Uruguay (Bucheli & Vigorito, 2019). This is driven by economic pressures and gender roles that undergird increases in female-headed households, as many women view marriage as risky and unstable in places like Mexico and Nicaragua (Altamirano Montoya & Teixeira, 2016; García & Oliveira, 2011). Wealthier countries like Costa Rica and Brazil report similar trends, as cohabitation and informal unions replace traditional marriage (Gibbons, 2024).

Cohabitation's rise reflects cultural and economic shifts driving increased diversity in family forms. Young Chileans opt for cohabitation due to its perceived flexibility and affordability, whereas in Bolivia and Paraguay, economically independent women choose to cohabit for greater autonomy (Lesthaeghe & Esteve, 2016). In Argentina, cohabitation is seen as a "trial" marriage that can precede marriage rather than displacing it (Esteve et al., 2022).

Family diversity has led to more divorce, as unions become less stable. This is partly driven by more liberal divorce laws advocated by educated women seeking freedom from unhappy marriages (Bucheli & Vigorito, 2019). In Brazil and Colombia, divorce results from poor economic circumstances and shifting gender norms, making marriage navigation difficult (Grace & Sweeney, 2014). Post-divorce economic consequences can render women and children at risk of socioeconomic decline, as seen in Hispaniola (Flake & Forste, 2006).

Despite changes, family remains central, seen in strong intergenerational and kinship ties. Guatemalan and Costa Rican families report that extended families are key to navigating strains (García & Oliveira, 2011), particularly in rural areas where financial straits force families to pool resources. Parental poverty and migration necessitate grandparental childcare to maintain family stability (Castro Torres, 2023).

Parent-child relationships remain strong but evolve with changing structures. In Mexico, parenting styles are becoming more democratic, encouraging open communication (Gibbons, 2024). This shift may be evident in Guatemala, Honduras, and Nicaragua, where educational advancements and economic development have led to changes in family formation and parent-child relations due to instability in cohabiting unions (Grace & Sweeney, 2014). Traditional, hierarchical structures persist in countries like Peru and Paraguay, where obedience and respect for elders remain central (Esteve et al., 2022; Glaser et al., 2006).

Economic inequality shapes family dynamics across the region. In wealthier countries like Argentina, Chile, and Brazil, wealthier families access high-quality education and healthcare, contributing to stability (Esteve & Lesthaeghe, 2016). In poorer areas like Haiti and Honduras, limited resources mean precarious conditions and more stress as households struggle to provide necessities (St. Bernard, 2003). Such inequality is visible in rural areas, making families reliant on informal networks (Castro Torres, 2023).

To sum, families in Latin America and the Caribbean are changing as key pillars like marriage, cohabitation, and divorce shift. Intergenerational kinship and extended family ties often fill gaps when formal resources are insufficient or unavailable.

North America

Just as in other regions, the family in North America has experienced significant transformations, as marriage, cohabitation, divorce, and family structures continue to shape and be shaped by changing social norms. These have led to changes in social policies, economic, health, and educational outcomes, translating into heterogeneity in well-being for adults and children.

Marriage remains a fundamental yet contentious institution. Declining marriage rates and rising age at marriage reflect an eschewal of traditional models, with many Canadian young adults opting for alternatives like prolonged singlehood or cohabitation (Ménard, 2011). Similarly, fewer adults in the United States are married, as the median age at first marriage approaches or exceeds 30 for both men and women (Smock & Schwartz, 2020). Such changes reflect broader economic and cultural shifts, as marriage becomes increasingly the purview of the educated elite and becomes deinstitutionalized (Cherlin, 2020). Educated and affluent individuals are more likely to marry and maintain stable and happy marriages compared to those without similar social advantages (Cherlin, 2020; Smock & Schwartz, 2020).

As marriage declines, cohabitation ascends as a common step toward or replacement of marriage. Canadian and American young adults are more likely to cohabit rather than marry for their first coresidential union. In Quebec, cohabiting couples approach 40%, and nearly 60% of births occur outside marriage (Hamplová et al., 2021). In the United States, cohabitation is viewed as an alternative or precursor to marriage, even as such unions remain less stable (Sassler & Lichter, 2020). This difference in stability leads to high rates of relationship churning, as individuals enter and exit long-term relationships at higher rates than most other countries (Raley & Sweeney, 2020).

Divorce has become more common, although it remains about half as common in Canada than in the United States. Both countries have seen dramatic rises in divorce among individuals aged 50 and over, termed “gray divorce” (Margolis et al., 2019), suggesting changing expectations for marriage at older ages. However, the general divorce rate in Canada has declined among younger cohorts due to increased hesitancy to marry (Margolis & Choi, 2020). In the United States, similar declines among younger cohorts are observed, while older adults experience rising divorce rates (Raley & Sweeney, 2020; Smock & Schwartz, 2020).

Researchers focus on how the quality of romantic relationships impacts family stability and well-being, demonstrating positive effects of high-quality relationships for better outcomes for adults and children. Canadian studies underscore how happy marriages improve health, whereas conflicts can damage marital quality, especially among older couples (Mitchell & Dhillon, 2023). While the link between premarital cohabitation and divorce has weakened, as cohabitation becomes normative (Sassler & Lichter, 2020), cohabitators generally report lower satisfaction and happiness compared to married individuals, reflecting different expectations, social support, and resources (Cherlin, 2020).

Family complexity influences how parents and children interact and affects intergenerational and extended family dynamics. In the United States and Canada, widespread divorce and remarriage have resulted in complex family structures, including stepfamilies and multigenerational households. In the United States, nearly one-third of children are expected to share a household with a grandparent, as extended family support becomes essential (Berger & Carlson, 2020). In Canada, more young adults live with their parents due to labor market struggles, rising debt, and high housing prices, a pattern mirrored in the United States (Mazurik et al., 2020).

Family change reflects broader socioeconomic and racial disparities, resulting in increasing inequality for children and parents. Single parents, often at risk of economic hardship and elevated stress, remain a concern in both countries because they have less access to valuable resources, resulting in more work-family conflict and emotional strains than coupled individuals (Nomaguchi & Milkie, 2020). While extended family can help mitigate risks associated with single parenthood (Buehler, 2020), ethnic and racial socialization within families is essential for children’s healthy social development, as the United States becomes more ethnically diverse (Umaña-Taylor & Hill, 2020).

Overall, transformations in marriage, cohabitation, divorce, and family relations highlight increasing complexity in family relationships across North America as cultural, social, and economic norms challenge traditional ideals of family stability and cohesion. Such changes are reflected in public policy and social welfare programs designed to support a wide array of families and promote the wellbeing of every family member.

Europe

While the family remains fundamental in Europe, transformations in marriage, cohabitation, divorce, and other patterns reflect shifting support for the family’s role. These shifts are crucial for understanding and addressing social concerns and inequalities that undermine wellbeing.

Recent decades have seen a marked decline in marriage across Europe, as fewer people marry and, when they do, at older ages. Swedish women reported a mean age at first marriage of 33 in 2011 (Coleman, 2013). This pattern is repeated across the continent, with the average age at first marriage increasing between 2010 and 2018 in most countries, Spain and Sweden leading (Majdzińska, 2022). In Estonia, the marriage rate dropped from about 10 per 1,000 in the 1970s to less than 4 per 1,000 in 2010 (Kutsar et al., 2012). Despite the decline, marriage retains symbolic value, especially in Central and Eastern Europe, where it remained the most common type of first partnership during the transition from communism, though numbers have begun to decline (Mureşan & Oláh, 2019). Education is key to understanding marriage patterns; highly educated individuals in Hungary, Poland, and Romania were more likely to marry than their less educated counterparts (Mureşan & Oláh, 2019).

As marriage falls, cohabitation rises, though some choose prolonged singlehood. Cohabitation often serves as an alternative or precursor to marriage and is nearly universally spreading across Europe, with regional diversity (Kasearu & Kutsar, 2011). In Northern European countries like Sweden and Denmark, over 60% of marrying-age adults have cohabited, and nearly half of individuals aged 26–35 currently cohabit. Estonia also shows high rates, with nearly 6 in 10 of those aged 18–45 having ever cohabited (Kasearu & Kutsar, 2011). Cohabitation remains less common in Southern and Eastern Europe, where only 8% and 4% of young adults reported cohabiting in Spain and Portugal, respectively. In Poland, the percent of those cohabiting more than doubled in a 4-year period (Kasearu & Kutsar, 2011). In Hungary, cohabitation has become the preferred first union, as direct marriages have fallen (Mureşan & Oláh, 2019).

More people are choosing to end their marriage. Across Europe, between one-half and two-thirds of first marriages are expected to end in divorce, as relationships become increasingly unstable (Mortelmans, 2021). In 2002 in Estonia, the divorce rate surpassed the marriage rate (Coleman, 2013). Legal and policy changes, such as unilateral and no-fault divorce laws, have resulted in divorce rates that increase annually (Mortelmans, 2021). Increased selection into marriage and greater cohabitation have contributed to a plateauing of divorce rates in some countries, though premarital cohabitation is associated with higher divorce risk (Mortelmans, 2021).

Married and cohabiting couples report differing levels of relationship quality. Cohabitors often report lower satisfaction and higher breakup intentions than married couples, with greater differences in countries where cohabitation remains deinstitutionalized (Wiik et al., 2012). Cohabiting couples report more disagreements overall than married couples across 22 European countries, even after accounting for economic and demographic factors (Van der Lippe et al., 2014). Married individuals tend to report high levels of satisfaction with their relationships (Sorokowski et al., 2017).

Parent-child relationships vary across the continent as changes in parenting practices and the impact of divorce influence interactions. Estonia has shifted from authoritarian parenting to more democratic approaches. Over half of young adults agreed their parents respected their opinions (Kutsar et al., 2012). Kalmijn and Leopold (2021) found that the negative association between parenthood and separation, as well as educational stratification, has resulted in growing inequalities in children's experiences, as their parents end relationships.

Intergenerational ties remain strong throughout the Mediterranean region, where families report close-knit relationships, coresidence, and frequent contact (Montoro-Gurich & Garcia-Vivar, 2019). Half of older adults live with their children in Spain and Italy, and 4 in 10 do so in Greece (Montoro-Gurich & Garcia-Vivar, 2019). More than half of grandparents across Europe provide care for their grandchildren, and more than a third of Italian parents report their parents help with daily childcare responsibilities (Bordone et al., 2017). Young adults leave the parental home at later ages in Southern Europe compared to other parts; Spanish and Italian young adults are often nearly 30 before establishing independent homes, while in Germany, France, and Britain, the age is often between 23 and 24 (Montoro-Gurich & Garcia-Vivar, 2019).

Declining marriage rates and climbing divorce and cohabitation rates mean European families feel the ground shifting as social, cultural, and economic change requires confrontation of new realities. Relationships are less stable, though many, especially marriages, continue to report high satisfaction. Some regions, especially the Mediterranean, report strong family ties as support networks sustain members through difficult transitions. Policymakers' ability to understand and address these developments will be essential to ensure access to opportunity for all European families.

Strengths and Limitations

This manuscript has several strengths. First, it provides a comprehensive narrative synthesis of global family trends by integrating theoretical perspectives and empirical findings across diverse geographical, cultural, and socioeconomic contexts. By employing multilingual research literature and translation tools, the review ensures broad representation and inclusivity of findings, particularly from regions often overlooked in family scholarship. Second, the proposed Integrative Convergence-Divergence Model (ICDM) helps address simultaneous convergence and divergence in global family dynamics by aiming to capture complexity in global-local interactions influencing family structures and processes, enhancing explanatory power over previously fragmented theories. Third, the integration of policy implications bridges research, theory, and policymaking.

However, the manuscript also has limitations. The narrative review format lacks the methodological rigor associated with systematic or meta-analytic reviews and may introduce selection bias. Although efforts were made to include diverse geographic regions, some areas – particularly less-researched countries – remain underrepresented due to limited data availability or insufficient recent studies. Another limitation pertains to the inherent complexity of global family dynamics, which makes comprehensive coverage challenging in light of important regional subtleties. Consequently, we provide illustrative rather than exhaustive examples. Lastly, the proposed ICDM requires further empirical validation. Recognizing these limitations, future research could employ rigorous, systematic methodologies to validate theoretical propositions, expand empirical coverage in underrepresented regions, and clarify the complex interplay of global and local influences on family life.

Conclusion, Implications, and Future Directions

Family structure and stability are deeply connected to individual and societal well-being. Shaped by global and local forces, marriage, cohabitation, parent-child relationships, and broader kinship networks intersect with modernization, economic development, and shifting gender norms. These trends do not unfold uniformly across regions, as cultural traditions, religious values, and policy frameworks mediate the effects of global influences.

This concluding section highlights two critical areas that underscore the importance of strong family systems: the relationship between family dynamics and mental health and the role of policies in fostering family well-being. Understanding these connections provides valuable insights for researchers and policymakers seeking to strengthen families amid shifting social, economic, and political tides.

Family Dynamics and Mental Health

Family dynamics and mental health are inextricably linked throughout the life course. Family structure, relationship quality, and the stability of the home environment influence psychological wellbeing. Research from across the world demonstrates how marriage, divorce, cohabitation, and relationship quality impact mental health.

Marriage, especially when happy and stable, is associated with better mental health outcomes across time and space. One review found marriage accounts for around two-thirds of the variance in mental health indicators such as depression, suicidality, and alcohol use, after accounting for genetic factors (Braithwaite & Holt-Lunstad, 2017). Research shows that transitioning from singlehood into marriage is protective of mental health for both men and women (Amato, 2014), and Norwegian research demonstrates that the effects endure over time (Kravdal et al., 2023).

Not all marriages are equally beneficial, as the quality of family relationships shapes the benefits. When individuals report highly cohesive family relationships characterized by low conflict, depression tends to be lower across the life course from adolescence to midlife (Chen & Harris, 2019).

How cohabitation shapes mental health is more nuanced. Some research found that stable companionship, whether marriage or cohabitation, offers similar benefits, as entry into either relationship is associated with reductions in depressive symptoms and suicidal ideation (Amato, 2014). However, these benefits tend to be temporary, often dissipating in the first few years. Poorer mental health outcomes among cohabitators compared to married individuals have been found in Europe, particularly among women (Yucel & Latshaw, 2023).

Perhaps the clearest association of family structure and mental health is for divorce, which is consistently linked to substantial poor effects. A meta-analysis with over half a million participants found that experiencing parental divorce during childhood was associated with more depression and substance abuse in adulthood and increased risk of suicidal ideation (Auersperg et al., 2019). Family instability, with divorce as the primary cause for many children around the world, often leads to emotional and behavioral problems, with many adults and children experiencing persistent declines (Braithwaite & Holt-Lunstad, 2017).

Beyond spousal relationships, childbearing and the number of children can also affect mental health – though in complex ways. Parenthood often brings both stress and emotional rewards, depending on factors like social support, financial resources, and family functioning (Nomaguchi & Milkie, 2020). At the same time, supportive intergenerational relationships – such as help from grandparents – can provide a buffering effect, offering emotional and practical resources that help protect against negative mental health outcomes. These additional dimensions of family life illustrate how broader kinship dynamics and parental roles can shape psychological well-being alongside marriage, cohabitation, and divorce.

The complex interplay between family dynamics and mental health is well established. Marriage generally bestows mental health advantages, especially when the relationship is happy and stable. Cohabitation may offer similar benefits, yet relationship instability can make realizing these benefits difficult. Divorce and family instability are nearly universally associated with negative outcomes, emphasizing how crucial stable and supportive family environments are.

The Policy Imperative of Supporting Families – How Policymakers Can Leverage Family Policies to Strengthen Social Cohesion and Improve Societal Well-Being

A key objective of this manuscript has been to showcase the diversity of family forms, dynamics, and trends across the globe, highlighting the importance of tailoring policy efforts not only to international agendas but also to each

country's cultural, socioeconomic, and political reality. Global policy frameworks offer overarching principles – such as promoting gender equality or securing child welfare – but regional and national policy measures must address local nuances. The responsibility for harmonizing these broad goals with on-the-ground needs often falls on interdisciplinary teams of experts working at both national and international levels, ensuring that research, policy, and practice remain meaningfully integrated and responsive to the needs of local families.

Such integrated teams of policymakers and experts confront the challenge of promoting social wellbeing in a complex global landscape. One effective way is by implementing policies that leverage the fundamental role of families. As the cornerstone of societies, families have a profound impact on social structures and individual lives. Policymakers have the opportunity and responsibility to enact policies that support families to prevent poverty, socialize children, and ensure families are characterized by legitimacy, companionship, and stability. These efforts benefit individual families and contribute to broader societal well-being and cohesion.

First, policymakers can help prevent poverty via family-centric economic policies. Poverty undermines social cohesion and hampers societal progress. Families, when supported appropriately, can prevent and alleviate poverty. Policymakers can implement a range of family-centric economic policies, including:

- **Comprehensive Social Safety Nets:** Establishing or strengthening social protection programs that provide financial assistance to low-income families can reduce poverty rates;
- **Affordable Childcare and Education:** Subsidizing childcare and ensuring access to quality education enable parents to work, increasing household income and reducing poverty. Offering support for parents who choose to stay home with their children fosters family wellbeing while recognizing the value of caregiving and the concomitant benefits for children;
- **Parental Leave and Flexible Work Policies:** Instituting paid parental leave and promoting flexible work arrangements help families balance work and caregiving responsibilities, strengthening family bonds while ensuring financial stability;
- **Housing Assistance Programs:** Ensuring families can find safe and affordable housing creates a stable environment conducive to children's healthy development and social cohesion.

By focusing on these areas, policymakers can strengthen families, reduce poverty, and alleviate social challenges. Such policies must account for diverse family structures and cultural contexts to maximize effectiveness.

Second, policymakers can ensure families have the resources to socialize children successfully.

The socialization of children is a critical family function that enables societies to both produce and benefit from productive citizens. Policymakers facilitate this by focusing on the following priorities:

- **Investing in Early Childhood Development:** Programs that support learning and development during early years have long-term benefits;
- **Strengthening Education Systems:** Involving parents in children's formal education improves outcomes;
- **Promoting Health and Wellness:** Access to healthcare services, including mental health, is essential to family wellbeing;
- **Supporting Positive Parenting Practices:** Governments can encourage positive parenting through resources and campaigns focusing on communication, discipline, and emotional support.

These policies create an environment where children can flourish, as they develop social skills, empathy, and a sense of civic duty. When policymakers invest in supporting children's healthy socialization, they ensure that families have the support they need to be successful.

Finally, policymakers can support families by ensuring romantic relationships are anchored in legitimacy, companionship, and stability. Legitimacy, or legal recognition of family relationships, provides access to rights, protections, and benefits. Viewing families as legal, economic, and social units reinforces social stability via shared norms and values.

Companionship, where individuals are committed to each other's wellbeing, leads to more stable relationships. Policies that focus on companionship in marriage are economical ways to support families. Marriage and relationship support programs can offer counseling, education, and conflict resolution resources, strengthening family relations.

Family stability is critical because stable families are the foundation of a healthy, prosperous society. When families break down, societies experience negative outcomes that strain government resources and impede devel-

opment. Therefore, maintaining family stability is essential. Governments can support families experiencing economic insecurities with policies providing job security, fair wages, and unemployment benefits.

Policies focusing on legitimacy, companionship, and stability can improve family life and societal wellbeing. Policymakers should recognize diverse family structures and cultural practices, shaping policies accordingly. Community engagement ensures policies are culturally appropriate and effectively address local needs.

Families – though they evolve in response to economic, social, and ideological shifts – remain central. The Integrative Convergence-Divergence Model (ICDM) provides a framework for understanding these complex patterns, recognizing that while family trends often converge globally, cultural and historical forces ensure continued regional singularity.

As policymakers consider strategies to enhance family stability and well-being, a nuanced approach is essential – one that acknowledges the interplay between economic development, social policies, and cultural and religious norms. Future research should explore how policies interact with family structures in diverse contexts and how emerging trends, such as digital transformation and shifting labor markets, will continue to shape families. Because the health of families directly impacts the health of nations, policymakers must prioritize families. Investing in families safeguards the success of the Sustainable Development Goals and ensures a high quality of life for all while building resilient communities.

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References

Abalos, J. B. (2023). Do Filipinos still say "I do"? The continuing increase in non-marriage and cohabitation in the Philippines. *Journal of Family Issues*, 45(5), 1326–1349. <https://doi.org/10.1177/0192513X231182366>

Al Gharaibeh, F., & Bromfield, N. F. (2012). An analysis of divorce cases in the United Arab Emirates: A rising trend. *Journal of Divorce & Remarriage*, 53(6), 436–452. <https://doi.org/10.1080/10502556.2012.682896>

Al-Hakami, H., & McLaughlin, K. (2016). Debatable marriages: Marriage and child marriage in Saudi Arabia. *Marriage & Family Review*, 52(7), 654–664. <https://doi.org/10.1080/01494929.2016.1157119>

Al-Hassan, S. M., & Rothenberg, W. A. (2021). Four domains of parenting in Jordan. In J. E. Lansford, W. A. Rothenberg, & M. H. Bornstein (Eds.), *Parenting across cultures from childhood to adolescence: Development in nine countries* (1st ed., pp. 92–113). Routledge.

Altamirano Montoya, Á. J., & Teixeira, K. M. D. (2017). Multidimensional poverty in Nicaragua: Are female-headed households better off? *Social Indicators Research*, 132, 1037–1063.
<https://doi.org/10.1007/s11205-016-1345-y>

Al-Zamil, A. F., Hejjazi, H. M., AlShargawi, N. I., Al-Meshaal, M. A. A., & Soliman, H. H. (2014). The effects of divorce on Saudi girls' interpersonal adjustment. *International Social Work*, 59(2), 177–191.
<https://doi.org/10.1177/0020872813508571>

Amato, P. R. (2014). Marriage, cohabitation and mental health. *Family Matters*, 96, 5–13.

Auersperg, F., Vlasak, T., Ponocny, I., & Barth, A. (2019). Long-term effects of parental divorce on mental health: A meta-analysis. *Journal of Psychiatric Research*, 119, 107–115.
<https://doi.org/10.1016/j.jpsychires.2019.09.011>

Baig, T., Ganeshan, G. S., Ibrahim, H., Yousuf, W., & Mahfoud, Z. R. (2021). The association of parental involvement with adolescents' well-being in Oman: Evidence from the 2015 Global School Health Survey. *BMC Psychology*, 9, Article 175.
<https://doi.org/10.1186/s40359-021-00677-5>

Bandyopadhyay, S., & Green, E. (2021). Explaining inter-ethnic marriage in sub-Saharan Africa. *Journal of International Development*, 33(4), 627–643.
<https://doi.org/10.1002/jid.3535>

Batyra, E., & Pesando, L. M. (2023). Increases in child marriage among the poorest in Mali: 'Reverse policies' or data quality issues? *Population Studies*, 78(1), 93–111.
<https://doi.org/10.1080/00324728.2023.2181383>

Beck, S., de Vreyer, P., Lambert, S., Marazyan, K., & Safir, A. (2015). Child fostering in Senegal. *Journal of Comparative Family Studies*, 46(1), 57–73.
<https://www.jstor.org/stable/43613100>

Becker, C. M., Mirkasimov, B., & Steiner, S. (2017). Forced marriage and birth outcomes. *Demography*, 54(4), 1401–1423.
<https://doi.org/10.1007/s13524-017-0591-1>

Berger, L. M., & Carlson, M. J. (2020). Family policy and complex contemporary families: A decade in review and implications for the next decade of research and policy practice. *Journal of Marriage and Family*, 82(1), 478–507.
<https://doi.org/10.1111/jomf.12650>

Bird, A. L., Underwood, L., Berry, S., Grant, C. C., Gulliver, P., Fanslow, J., Ataoa Carr, P. E., Fa'alili-Fidow, J., & Morton, S. M. B. (2020). Physical conflict during pregnancy: A socio-ecological, cross-cultural examination of risk and protective factors for New Zealand women. *Violence Against Women*, 27(11), 1930–1956.
<https://doi.org/10.1177/1077801220971356>

Borbieva, N. O. N. (2012). Kidnapping women: Discourses of emotion and social change in the Kyrgyz Republic. *Anthropological Quarterly*, 85(1), 141–169.
<https://doi.org/10.1353/anq.2012.0015>

Bordone, V., Arpino, B., & Aassve, A. (2017). Patterns of grandparental childcare across Europe: The role of the policy context and working mothers' need. *Ageing & Society*, 37(4), 845–873.
<https://doi.org/10.1017/S0144686X1600009X>

Braithwaite, S., & Holt-Lunstad, J. (2017). Romantic relationships and mental health. *Current Opinion in Psychology*, 13, 120–125.
<https://doi.org/10.1016/j.copsyc.2016.04.001>

Brandl, E., Emmott, E. H., & Mace, R. (2023). Adoption, fostering, and parental absence in Vanuatu. *Human Nature*, 34, 422–455.
<https://doi.org/10.1007/s12110-023-09456-0>

Brauner-Otto, S. R., Axinn, W. G., & Ghimire, D. J. (2020). Parents' marital quality and children's transition to adulthood. *Demography*, 57(1), 195–220.
<https://doi.org/10.1007/s13524-019-00851-w>

Bucheli, M., & Vigorito, A. (2019). Union dissolution and well-being in Uruguay. *World Development*, 117, 61–71.
<https://doi.org/10.1016/j.worlddev.2018.12.009>

Buckley, C. (1998). Rural/urban differentials in demographic processes: The Central Asian states. *Population Research and Policy Review*, 17, 71–89.
<https://doi.org/10.1023/A:1005899920710>

Buehler, C. (2020). Family processes and children's and adolescents' well-being. *Journal of Marriage and Family*, 82(1), 145–174.
<https://doi.org/10.1111/jomf.12637>

Castro Torres, A. F. (2023). The neglected role of domestic migration on family patterns in Latin America and the Caribbean, 1950–2000. *Studies in Family Planning*, 54(2), 355–377.
<https://doi.org/10.1111/sifp.12241>

Castro Torres, A. F., Pesando, L. M., Kohler, H.-P., & Furstenberg, F. (2022). Family change and variation through the lens of family configurations in low- and middle-income countries. *Population, Space and Place*, 28(4), Article e2531.
<https://doi.org/10.1002/psp.2531>

Chae, S., Agadjanian, V., & Hayford, S. R. (2021). Bridewealth marriage in the 21st century: A case study from rural Mozambique. *Journal of Marriage and Family*, 83(2), 409–427.
<https://doi.org/10.1111/jomf.12725>

Chan, K. L., Emery, C. R., Fulu, E., Tolman, R. M., & Ip, P. (2017). Association among father involvement, partner violence, and paternal health: UN multi-country cross-sectional study on men and violence. *American Journal of Preventive Medicine*, 52(5), 671–679.
<https://doi.org/10.1016/j.amepre.2016.12.017>

Chen, P., & Harris, K. M. (2019). Association of positive family relationships with mental health trajectories from adolescence to midlife. *JAMA Pediatrics*, 173(12), Article e193336.
<https://doi.org/10.1001/jamapediatrics.2019.3336>

Cheng, S.-T. (2015). Demographic and family trends in Asia. In S.-T. Cheng, I. Chi, H. H. Fung, L. W. Li, & J. Woo (Eds.), *Successful aging: Asian perspectives* (pp. 21–32). Springer.
https://doi.org/10.1007/978-94-017-9331-5_2

Cheng, Y.-h. A. (2020). Ultra-low fertility in East Asia: Confucianism and its discontents. *Vienna Yearbook of Population Research*, 18, 83–120.
<https://www.jstor.org/stable/27041932>

Cherlin, A. J. (2009). *The marriage go-round: The state of marriage and the family in America today*. Knopf Doubleday Publishing Group.

Cherlin, A. J. (2020). Degrees of change: An assessment of the deinstitutionalization of marriage thesis. *Journal of Marriage and Family*, 82(1), 62–80.
<https://doi.org/10.1111/jomf.12605>

Chowbey, P. (2017). Women's narratives of economic abuse and financial strategies in Britain and South Asia. *Psychology of Violence*, 7(3), 459–468.
<https://doi.org/10.1037/vio0000110>

Chung, W.-Y., Yeung, W. J.-J., & Drobnič, S. (2021). Family policies and care regimes in Asia. *International Journal of Social Welfare*, 30(4), 371–384.
<https://doi.org/10.1111/ijsw.12512>

Clark, S., & Brauner-Otto, S. (2015). Divorce in sub-Saharan Africa: Are unions becoming less stable? *Population and Development Review*, 41(4), 583–605.
<https://doi.org/10.1111/j.1728-4457.2015.00086.x>

Cleuziou, J., & McBrien, J. (2021). Marriage quandaries in Central Asia. *Oriente Moderno*, 100(2), 121–146.
<https://www.jstor.org/stable/48650489>

Clifford, D., Falkingham, J., & Hinde, A. (2010). Through civil war, food crisis and drought: Trends in fertility and nuptiality in post-Soviet Tajikistan. *European Journal of Population*, 26, 325–350.
<https://doi.org/10.1007/s10680-010-9206-x>

Coleman, D. (2013). Partnership in Europe; its variety, trends and dissolution. *Finnish Yearbook of Population Research*, 48, 5–49.
<https://doi.org/10.23979/fypr.40927>

Coontz, S. (2006). *Marriage, a history: How love conquered marriage*. Penguin Books.

Crespin-Boucaud, J. (2019). Interethnic and interfaith marriages in sub-Saharan Africa (Working Paper 2018-37). *HAL Open Science*, Article halshs-01834808v2.
<https://shs.hal.science/halshs-01834808v2>

Doignon, Y., Blöss-Widmer, I., Ambrosetti, E., & Oliveau, S. (2023). Family formation and dissolution. In Y. Doignon, I. Blöss-Widmer, E. Ambrosetti, & S. Oliveau (Eds.), *Population dynamics in the Mediterranean: A demographic convergence?* (pp. 81–98). SpringerBriefs in Population Studies. Springer.
https://doi.org/10.1007/978-3-031-37759-4_6

Dommaraju, P., & Agadjanian, V. (2008). Nuptiality in Soviet and post-Soviet Central Asia. *Asian Population Studies*, 4(2), 195–213.
<https://doi.org/10.1080/17441730802247463>

Dommaraju, P., & Jones, G. (2011). Divorce trends in Asia. *Asian Journal of Social Science*, 39(6), 725–750.
<https://doi.org/10.1163/15685311X619201>

Dyson, T. (2012). Causes and consequences of skewed sex ratios. *Annual Review of Sociology*, 38, 443–461.
<https://doi.org/10.1146/annurev-soc-071811-145429>

Endeweld, M., Herbst-Debby, A., & Kaplan, A. (2022). Do the privileged always win? Economic consequences of divorce by income and gender groups. *Social Indicators Research*, 159, 77–100.
<https://doi.org/10.1007/s11205-021-02733-4>

Esping-Andersen, G., & Billari, F. C. (2015). Re-theorizing family demographics. *Population and Development Review*, 41(1), 1–31.
<https://doi.org/10.1111/j.1728-4457.2015.00024.x>

Esteve, A., Castro-Martín, & Castro Torres, A. F. (2022). Families in Latin America: Trends, singularities, and contextual factors. *Annual Review of Sociology*, 48, 485–505.
<https://doi.org/10.1146/annurev-soc-030420-015156>

Esteve, A., & Lesthaeghe, R. J. (Eds.). (2016). *Cohabitation and marriage in the Americas: Geo-historical legacies and new trends*. Springer.

Flake, D. F., & Forste, R. (2006). Fighting families: Family characteristics associated with domestic violence in five Latin American countries. *Journal of Family Violence*, 21, 19–29.
<https://doi.org/10.1007/s10896-005-9002-2>

Fledderjohann, J. (2017). Difficulties conceiving and relationship stability in sub-Saharan Africa: The case of Ghana. *European Journal of Population*, 33, 129–152.
<https://doi.org/10.1007/s10680-016-9401-5>

Frejka, T., & Gietel-Basten, S. (2016). Fertility and family policies in Central and Eastern Europe after 1990. *Comparative Population Studies*, 41(1), 3–56.
<https://doi.org/10.12765/CPoS-2016-03>

Furstenberg, F. F. (2019). Family change in global perspective: How and why family systems change. *Family Relations*, 68(3), 326–341.
<https://doi.org/10.1111/fare.12361>

García, B., & de Oliveira, O. (2011). Cambios familiares y políticas públicas en América Latina [Family changes and public policies in Latin America]. *Annual Review of Sociology*, 37, 593–611.
<https://doi.org/10.1146/annurev-soc-081309-150205>

Georgas, J., Berry, J. W., van de Vijver, F. J. R., Kagitçibasi, Ç., & Poortinga, Y. H. (Eds.). (2006). *Families across cultures: A 30-nation psychological study*. Cambridge University Press.
<https://doi.org/10.1017/CBO9780511489822>

Gibbons, J. L. (2024). Enriching developmental science from the Global South: Contributions from Latin America. *American Psychologist*, 79(5), 735–747.
<https://doi.org/10.1037/amp0001367>

Gilbert, N., & Brik, A. B. (2022). Family life and the demographic transition in MENA countries: Implications for social policy. *Journal of International and Comparative Social Policy*, 38(1), 15–35.
<https://doi.org/10.1017/ics.2021.17>

Glaser, K., Agree, E. M., Costenbader, E., Camargo, A., Trench, B., Natividad, J., & Chuang, Y.-L. (2006). Fertility decline, family structure, and support for older persons in Latin America and Asia. *Journal of Aging and Health*, 18(2), 259–291.
<https://doi.org/10.1177/0898264305285668>

Glick, J. E. (2010). Connecting complex processes: A decade of research on immigrant families. *Journal of Marriage and Family*, 72(3), 498–515.
<https://doi.org/10.1111/j.1741-3737.2010.00715.x>

Goldscheider, F., Bernhardt, E., & Lappégård, T. (2015). The gender revolution: A framework for understanding changing family and demographic behavior. *Population and Development Review*, 41(2), 207–239.
<https://doi.org/10.1111/j.1728-4457.2015.00045.x>

Goode, W. J. (1963). *World revolution and family patterns*. Free Press.

Grace, K., & Sweeney, S. (2014). Pathways to marriage and cohabitation in Central America. *Demographic Research*, 30, Article 6, 187–226.
<https://doi.org/10.4054/DemRes.2014.30.6>

Hamplová, D., Le Bourdais, C., & Legendre, B. (2021). Partners' relative income and the risk of union dissolution in two institutional contexts. *European Sociological Review*, 37(4), 525–540.
<https://doi.org/10.1093/esr/jcaa074>

Heuveline, P., & Nakphong, M. K. (2023). Contemporary marriage in Cambodia. *Journal of Family Studies*, 45(5), 1166–1194.
<https://doi.org/10.1177/0192513X231155590>

Ihmeideh, F. (2019). Getting parents involved in children's play: Qatari parents' perceptions of and engagement with their children's play. *Education 3-13*, 47(1), 47–63.
<https://doi.org/10.1080/03004279.2017.1399152>

Ilie, S., & Rose, P. (2016). Is equal access to higher education in South Asia and sub-Saharan Africa achievable by 2030? *Higher Education*, 72, 435–455.
<https://doi.org/10.1007/s10734-016-0039-3>

Inglehart, R., & Baker, W. E. (2000). Modernization, cultural change, and the persistence of traditional values. *American Sociological Review*, 65(1), 19–51.
<https://doi.org/10.2307/2657288>

Islam, M. M. (2012). The practice of consanguineous marriage in Oman: Prevalence, trends and determinants. *Journal of Biosocial Science*, 44(5), 571–594.
<https://doi.org/10.1017/S0021932012000016>

Jarallah, Y. (2022). The ties that bind? Marriage formation, consanguinity and war in Lebanon and Palestine. *Journal of Population Research*, 39, 97–132.
<https://doi.org/10.1007/s12546-022-09281-9>

Jejeebhoy, S. J., Santhya, K. G., & Acharya, R. (2014). Violence against women in South Asia: The need for the active engagement of the health sector. *Global Public Health*, 9(6), 678–690.
<https://doi.org/10.1080/17441692.2014.916736>

Jensen, A.-M. (2015). Changes in brideprice payments in Christian and Muslim villages of Kenya. *Journal of Comparative Family Studies*, 46(1), 105–120.
<https://doi.org/10.3138/jcfs.46.1.105>

Jones, G. W., & Yeung, W.-J. J. (2014). Marriage in Asia. *Journal of Family Issues*, 35(12), 1567–1583.
<https://doi.org/10.1177/0192513X14538029>

Kalmijn, M., & Leopold, T. (2021). A new look at the separation surge in Europe: Contrasting adult and child perspectives. *American Sociological Review*, 86(1), 1–34.
<https://doi.org/10.1177/0003122420973982>

Kamal, S. M., & Ulas, E. (2020). Child marriage and its impact on fertility and fertility-related outcomes in South Asian countries. *International Sociology*, 36(3), 362–377.
<https://doi.org/10.1177/0268580920961316>

Kasearu, K., & Kutsar, D. (2011). Patterns behind unmarried cohabitation trends in Europe. *European Societies*, 13(2), 307–325.
<https://www.europeansources.info/record/patterns-behind-unmarried-cohabitation-trends-in-europe/>

Kim, Y.-P., Joh, J.-Y., & Shin, I.-S. (2012). Family function of families consisting of Asian immigrant women living in South Korea: A 3-year longitudinal study. *Asia-Pacific Journal of Public Health*, 27(2), NP2702–NP2711.
<https://doi.org/10.1177/1010539512446958>

Kolman, I. (2018). Beyond non-registration: Women opting for cohabitation in Tunis. *Sociology of Islam*, 6(3), 381–400.
<https://doi.org/10.1163/22131418-00603007>

Kovacheva, S., Kabaivanov, S., & Roberts, K. (2018). Interrogating waithood: Family and housing life stage transitions among young adults in North-West Africa. *International Journal of Adolescence and Youth*, 23(4), 441–456.
<https://doi.org/10.1080/02673843.2018.1430595>

Kravdal, Ø., Wörn, J., & Reme, B.-A. (2023). Mental health benefits of cohabitation and marriage: A longitudinal analysis of Norwegian register data. *Population Studies*, 77(1), 91–110.
<https://doi.org/10.1080/00324728.2022.2063933>

Kuehnast, K., & Dudwick, N. (2004). *Better a hundred friends than a hundred rubles? Social networks in transition—The Kyrgyz Republic*. World Bank Working Paper.

Kutsar, D., Kasearu, K., & Kurrikoff, T. (2012). Family trends and changing parenting practices in Estonia. *Cognition, Brain, Behavior: An Interdisciplinary Journal*, 16(2), 171–190.

Lesthaeghe, R. (2010). The unfolding story of the second demographic transition. *Population and Development Review*, 36(2), 211–251.
<https://doi.org/10.1111/j.1728-4457.2010.00328.x>

Lesthaeghe, R., & Esteve, A. (2016). Cohabitation and marriage in the Americas: Geo-historical legacies and new trends. In A. Esteve & R. Lesthaeghe (Eds.), *Cohabitation and marriage in the Americas* (pp. 1–26). Springer.

Luo, F. (2024). The cost of marriage in contemporary China. *Journal of Education, Humanities and Social Sciences*, 35, 476–481.
<https://doi.org/10.54097/z4pers51>

Majdzińska, A. (2022). The typology of first marriage patterns in Europe. *Journal of Geography, Politics and Society*, 12(3), 14–30.
<https://doi.org/10.26881/jpgs.2022.3.02>

Margolis, R., & Choi, Y. (2020). The growing and shifting divorced population in Canada. *Canadian Studies in Population*, 47, 43–72.
<https://doi.org/10.1007/s42650-020-00018-8>

Margolis, R., Choi, Y., Hou, F., & Haan, M. (2019). Capturing trends in Canadian divorce in an era without vital statistics. *Demographic Research*, 41, 1453–1478.
<https://doi.org/10.4054/DEMRES.2019.41.52>

Mazurik, K., Knudson, S., & Tanaka, Y. (2020). Stuck in the nest? A review of the literature on coresidence in Canada and the United States. *Marriage & Family Review*, 56(6), 491–512.
<https://doi.org/10.1080/01494929.2020.1728005>

McDonald, K., Cash McGinley, H. L., Abraham, D., Kapiriel, S. F., & Lorrin, M. (2024). Characterizing family planning utilization in adult women and adolescents in Pohnpei, Federated States of Micronesia. *Maternal and Child Health Journal*, 28, 1178–1187.
<https://doi.org/10.1007/s10995-024-03906-6>

Ménard, F.-P. (2011). What makes it fall apart? The determinants of the dissolution of marriages and common-law unions in Canada. *McGill Sociological Review*, 2, 59–76.

Merdad, N., Elbedour, S., Lau, J., & Barker, E. (2023). Polygamy and mental health among Saudi middle schoolers: The role of family cohesion and father involvement. *Family Relations*, 72(3), 774–793.
<https://doi.org/10.1111/fare.12741>

Mitchell, B. A., & Dhillon, S. K. (2023). Happily ever after or not? Marital quality among culturally diverse older-aged Canadian parents. *Journal of Comparative Family Studies*, 54(1), 51–74.
<https://doi.org/10.3138/jcfs.54.1.050>

Mokomane, Z. (2012, September 10–12). *Role of families in social and economic empowerment of individuals*. United Nations Expert Group Meeting on “Promoting Empowerment of People in Achieving Poverty Eradication, Social Integration and Full Employment and Decent Work for All”, United Nations, New York.
<https://www.un.org/esa/socdev/egms/docs/2012/FamilyZithaMokomane.pdf>

Montoro-Gurich, C., & Garcia-Vivar, C. (2019). The family in Europe: Structure, intergenerational solidarity, and new challenges to family health. *Journal of Family Nursing*, 25(2), 170–189.
<https://doi.org/10.1177/1074840719841404>

Moore, E., & Govender, R. (2013). Marriage and cohabitation in South Africa: An enriching explanation? *Journal of Comparative Family Studies*, 44(5), 623–639.
<https://doi.org/10.3138/jcfs.44.5.623>

Mortelmans, D. (2021). Causes and consequences of family dissolution in Europe and post-divorce families. In N. F. Schneider & M. Kreyenfeld (Eds.), *Research handbook on the sociology of the family* (pp. 232–247). Edward Elgar Publishing.
<https://doi.org/10.4337/9781788975544.00024>

Mtshali, M. N. G. (2015). The relationship between grandparents and their grandchildren in Black families in South Africa. *Journal of Comparative Family Studies*, 46(1), 75–83.
<https://doi.org/10.3138/jcfs.46.1.75>

Mu, Z. (2024). Premarital cohabitation, marital dissolution, and marital quality in China. *Journal of Family Issues*, 45(5), 1305–1325.
<https://doi.org/10.1177/0192513X231155663>

Mureşan, C., & Oláh, L. S. (2019). Men's first partnership formation in four former state-socialist countries during the transition period. *Romanian Journal of Population Studies*, 13(2), 35–52.
<https://doi.org/10.24193/RJPS.2019.2.03>

Nedoluzhko, L., & Agadjanian, V. (2015). Between tradition and modernity: Marriage dynamics in Kyrgyzstan. *Demography*, 52(3), 861–882.
<https://doi.org/10.1007/s13524-015-0393-2>

Newton, N. J., Howard, C., Houkamau, C. A., & Sibley, C. G. (2024). Age, ethnicity, life events and wellbeing among New Zealand women. *Ageing and Society*, 44(6), 1288–1307.
<https://doi.org/10.1017/S0144686X22000770>

Nomaguchi, K., & Milkie, M. A. (2020). Parenthood and well-being: A decade in review. *Journal of Marriage and Family*, 82(1), 198–223.
<https://doi.org/10.1111/jomf.12646>

Norris, P., & Inglehart, R. (2004). *Sacred and secular: Religion and politics worldwide*. Cambridge University Press.
<https://doi.org/10.1017/CBO9780511791017>

Odimegwu, C. O. (Ed.). (2020). *Family demography and post-2015 development agenda in Africa*. Springer.

Ongolea, V., & Houkamau, C. (2024). Balancing anga faka-Tonga (the Tongan way of life) with financial well-being. *MAI Journal*, 13(1), 51–63.
<https://doi.org/10.20507/MAIJournal.2024.13.1.5>

Park, H. (2021). Introduction to the special collection on family changes and inequality in East Asia. *Demographic Research*, 44, 979–992.
<https://doi.org/10.4054/DemRes.2021.44.40>

Pesando, L. M. (2019). Global family change: Persistent diversity with development. *Population and Development Review*, 45(1), 133–168.
<http://dx.doi.org/10.1111/padr.12209>

Pesando, L. M. (2021). Educational assortative mating in sub-Saharan Africa: Compositional changes and implications for household wealth inequality. *Demography*, 58(2), 571–602.
<https://doi.org/10.1215/00703370-9000609>

Pesando, L. M., & Abufhele, A. (2019). Household determinants of teen marriage: Sister effects across four low- and middle-income countries. *Studies in Family Planning*, 50(2), 113–136.
<https://doi.org/10.1111/sifp.12089>

Pothisiri, W., Teerawichitchainan, B., & Kaewbuadee, N. (2023). Remarriage in Thailand: A study of emerging trends, correlates, and implications for women's well-being. *Journal of Family Issues*, 45(5), 1217–1241.
<https://doi.org/10.1177/0192513X231155659>

Rahmonova-Schwarz, D. (2012). *Family and transnational mobility in post-Soviet Central Asia. Labor migration from Kyrgyzstan, Tajikistan and Uzbekistan to Russia*. Baden-Baden: Nomos, Institute for Peace Research and Security Policy at the University of Hamburg.

Raley, R. K., & Sweeney, M. M. (2020). Divorce, repartnering, and stepfamilies: A decade in review. *Journal of Marriage and Family*, 82(1), 81–99.
<https://doi.org/10.1111/jomf.12651>

Rarau, P., Pulford, J., Gouda, H., Phuanukoonon, S., Bullen, C., Scragg, R., Pham, B. N., McPake, B., & Oldenburg, B. (2019). Socio-economic status and behavioural and cardiovascular risk factors in Papua New Guinea: A cross-sectional survey. *PLoS ONE*, 14(1), e0211068.
<https://doi.org/10.1371/journal.pone.0211068>

Raymo, J. M., Park, H., & Yu, J. (2023). Diverging destinies in East Asia. *Annual Review of Sociology*, 49, 443–463.
<https://doi.org/10.1146/annurev-soc-020321-032642>

Sagynbekova, L. (2017). Environment, rural livelihoods, and labor migration: A case study in central Kyrgyzstan. *Mountain Research and Development*, 37(4), 456–463.
<https://doi.org/10.1659/MRD-JOURNAL-D-17-00029.1>

Sassler, S., & Lichten, D. T. (2020). Cohabitation and marriage: Complexity and diversity in union-formation patterns. *Journal of Marriage and Family*, 82(1), 35–61.
<https://doi.org/10.1111/jomf.12617>

Scott, S., Nguyen, P. H., Neupane, S., Pramanik, P., Nanda, P., Bhutta, Z. A., Afsana, K., & Menon, P. (2021). Early marriage and early childbearing in South Asia: Trends, inequalities, and drivers from 2005 to 2018. *Annals of the New York Academy of Sciences*, 1491(1), 60–73.
<https://doi.org/10.1111/nyas.14531>

Sharkia, R., Mahajnah, M., Athamny, E., Khatib, M., Sheikh-Muhammad, A., & Zalan, A. (2016). Changes in marriage patterns among the Arab community in Israel over a 60-year period. *Journal of Biosocial Science*, 48(2), 283–287.
<https://doi.org/10.1017/S0021932015000103>

Silva, K. (2018). Marriage prestations, gift making, and identity in urban East Timor. *Oceania*, 88(1), 127–147.
<https://doi.org/10.1002/ocea.5185>

Smock, P. J., & Schwartz, C. R. (2020). The demography of families: A review of patterns and change. *Journal of Marriage and Family*, 82(1), 9–34.
<https://doi.org/10.1111/jomf.12612>

Sodei, T. (2004). Families in North-East Asia. *Geriatrics & Gerontology International*, 4(s1), S98–S100.
<https://doi.org/10.1111/j.1447-0594.2004.00165.x>

Sorokowski, P., Randall, A. K., Groycka, A., Frackowiak, T., Cantarero, K., Hilpert, P., Ahmadi, K., Alghraibeh, A. M., Aryeeetey, R., Bertoni, A., Bettache, K., Błażejewska, M., Bodenmann, G., Bortolini, T. S., Bosc, C., Butovskaya, M., Castro, F. N., Ctinckaya, H., Cunha, D., ... & Sorokowska, A. (2017). Marital satisfaction, sex, age, marriage duration, religion, number of children, economic status, education, and collectivistic values: Data from 33 countries. *Frontiers in Psychology*, 8, Article 1199.
<https://doi.org/10.3389/fpsyg.2017.01199>

Spoorenberg, T. (2018). Fertility preferences in Central Asia. In S. Gietel-Basten, J. Casterline, & M. K. Choe (Eds.), *Family demography in Asia* (pp. 88–108). Edward Elgar. <https://doi.org/10.4337/9781785363559.00011>

St. Bernard, G. (2003). *Major trends affecting families in Central America and the Caribbean*. United Nations Division of Social Policy and Development, Department of Economic and Social Affairs Program on the Family.

Stewart, P. J., & Strathern, A. J. (2023). Divorce: Experiential and structural elements: Cases from Papua New Guinea and Africa. *Religions*, 14(3), Article 303. <https://doi.org/10.3390/rel14030303>

Stone, L., & James, S. (2022). *Marriage still matters: Demonstrating the link between marriage and fertility in the 21st century*. Institute for Family Studies and BYU Wheatley Institute.

Sun, J., Lau, C., Sincovich, A., & Rao, N. (2018). Socioeconomic status and early child development in East Asia and the Pacific: The protective role of parental engagement in learning activities. *Children and Youth Services Review*, 93, 321–330. <https://doi.org/10.1016/j.childyouth.2018.08.010>

Therborn, G. (2004). *Between sex and power: Family in the world 1900–2000*. Routledge. <https://doi.org/10.4324/9780203643297>

Thornton, A. (2005). *Reading history sideways: The fallacy and enduring impact of the developmental paradigm on family life*. University of Chicago Press.

Tomar, S., Johns, N., Challa, S., Brooks, M. I., Aliou, S., Abdoul-Moumouni, N., Raj, A., & Silverman, J. (2021). Associations of age at marriage with marital decision-making agency among adolescent wives in rural Niger. *Journal of Adolescent Health*, 69(6, Suppl.), S74–S80. <https://doi.org/10.1016/j.jadohealth.2021.08.007>

Trask, B. S. (2022, May 13). *Urbanization, migration, and the family dimension*. Division for Inclusive Social Development, Focal Point on the Family, United Nations.

Umaña-Taylor, A. J., & Hill, N. E. (2020). Ethnic–racial socialization in the family: A decade’s advance on precursors and outcomes. *Journal of Marriage and Family*, 82(1), 244–271. <https://doi.org/10.1111/jomf.12622>

UN Habitat. (2022). *World cities report 2022: Envisaging the future of cities*. https://unhabitat.org/sites/default/files/2022/06/wcr_2022.pdf

UNICEF. (2021). *State of the world’s children: Only My Mind: Promoting, protecting, and caring for children’s mental health*. <https://www.unicef.org/reports/state-worlds-children-2021>

Van der Lippe, T., Voorpostel, M., & Hewitt, B. (2014). Disagreements among cohabiting and married couples in 22 European countries. *Demographic Research*, 31, 247–274. <https://doi.org/10.4054/DemRes.2014.31.10>

Vikram, K. (2024). Modern marriage in a traditional society: The influence of college education on marriage in India. *Journal of Family Issues*, 45(5), 1116–1141. <https://doi.org/10.1177/0192513X231155591>

Wallerstein, I. (1974). The rise and future demise of the world capitalist system: Concepts for comparative analysis. *Comparative Studies in Society and History*, 16(4), pp. 387–415. <http://www.jstor.org/stable/178015?origin=JSTOR-pdf>

Wang, Y.-T., & Yang, W.-S. (2023). Determinants of cohabitation in Taiwan: A panel data analysis. *Journal of Family Issues*, 45(5), 1071–1086. <https://doi.org/10.1177/0192513X231155589>

Welzel, C., & Inglehart, R. (2005). Liberalism, postmaterialism, and the growth of freedom. *International Review of Sociology*, 15(1), 81–108. <https://doi.org/10.1080/03906700500038579>

Werner C., Edling, C., Becker, C., Kim, E., Kleinbach, R., Sartbay, F. E., & Teachout, W. (2018). Bride kidnapping in post-Soviet Eurasia: A roundtable discussion. *Central Asian Survey*, 37(4), 582–601. <https://doi.org/10.1080/02634937.2018.1511519>

Wiik, K. A., Keizer, R., & Lappégård, T. (2012). Relationship quality in marital and cohabiting unions across Europe. *Journal of Marriage and Family*, 74(3), 389–398. <https://psycnet.apa.org/doi/10.1111/j.1741-3737.2012.00967.x>

Yucel, D., & Latshaw, B. A. (2022). Mental health across the life course for men and women in married, cohabiting, and living apart together relationships. *Journal of Family Issues*, 44(8), 2025–2053. <http://dx.doi.org/10.1177/0192513X211068038>

Ziehl, S. C. (2003). Forging the links: Globalisation and family patterns. *Society in Transition*, 34(2), 320–337. <https://doi.org/10.1080/21528586.2003.10419099>

PERSPECTIVE ARTICLE

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Using the Woolley Motivation Typology to Heal Infidelity With Emotionally Focused Therapy

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Introduction: Infidelity is a common challenge in couple therapy and requires nuanced understandings and interventions tailored to the underlying motivations of the affair.

Areas covered: This paper offers a practical framework for addressing infidelity by integrating Woolley's (2011) motivation-based typology of affairs into the practice of Emotionally Focused Therapy (EFT) and the Attachment Injury Repair Model (AIRM). The typology categorizes infidelity into three broad categories, and seven specific types based on motivations, offering a lens through which couple therapists can focus their approach.

Expert opinion: This article provides both general and specific treatment recommendations for each of the motivational types, which can help clinicians more effectively assist in ending affairs, reducing blaming, healing emotional wounds, creating safe emotional connection, and preventing future infidelity.

Conclusion: This article helps fill these gaps by laying out how the Woolley (2011) motivational typology can be used to guide treatment.

Keywords: affair, infidelity, EFT, motivations, typology, treatment

Introduction

A wealth of research has shown that the quality of romantic relationships and marriage itself offers various health benefits for the partners and can serve as a protective factor against health issues (Robles, 2014; Smith et al., 2011; Troxel et al., 2007; Wang et al., 2020) and the risk of mortality (Robles et al., 2014). Couple satisfaction is associated with lower stress levels, less depression, and is also linked to higher life satisfaction (Randall & Bodenmann, 2017). Infidelity presents a major threat to couple satisfaction and stability and is often confusing and difficult to treat for therapists. Consequently, this article lays out basic guidance for therapists who work with infidelity with a focus on how to use the Woolley (2011) typology on affairs.

Literature

Couples typically agree, either implicitly or explicitly, to limit sexual and romantic activities to within the relationship or additionally agreed upon relationships or people such as in the case of polyamory or open relationships (Davala & Mims, 2024). Infidelity involves engaging in romantic or sexual activities outside of the agreed upon boundaries (Fife et al., 2007; Rokach & Chan, 2023). The associated secrecy fosters mistrust, and undermines emotional safety, transparency, and mutual respect. This usually leads to profound emotional pain and long-lasting relationship problems or dissolution (Amato & Previti, 2003; Stavrova et al., 2023).

The prevalence of affairs is increasing (Fincham & May, 2017), likely due to several factors including a higher number of premarital sexual partners (Mark et al., 2015), increased access to pornography (Braithwaite et al., 2015), and greater opportunities for extradyadic involvement facilitated by the internet and fewer barriers to such behaviors (Fitzgerald et al., 2022; Glass & Staeheli, 2004; Hertlein & Piercy, 2006). Technology can reduce inhibitions and lower anxiety through perceived anonymity, physical distance, and control over communication and timing, thus encouraging behaviors that might be avoided face-to-face (Gonzales & Hancock, 2011; McKenna & Bargh, 2000). Regardless of the reasons, the incidence of affairs has become increasingly common, leading to a higher likelihood that therapists will encounter couples dealing with the challenges of infidelity in practice (Warach & Josephs, 2019).

Clinicians report that dealing with infidelity is among the most challenging issues in therapy (Girard et al., 2018; Timm & Hertlein, 2020), requiring significant skills in navigating the complex emotions and trust issues that arise. Emotionally Focused Therapy (EFT) for couples has been found to be highly effective in multiple outcome studies and meta-analyses (e.g. Beasley & Ager, 2019; Johnson et al., 1999; Spengler et al., 2024). It has also been found to be effective in enhancing forgiveness and intimacy and reducing burnout in women after their partner's infidelity (Najibzadegan et al., 2024). Additionally, it has been found to be more effective than Cognitive Behavior Therapy in fostering forgiveness and intimacy in women whose spouses engaged in infidelity (Asvadi et al., 2022).

Infidelity usually results in what Johnson et al. (2001) called attachment injuries. Attachment injuries involve a profound betrayal of trust or abandonment by an attachment figure, often at times of high need, which fundamentally undermines foundational trust and security in a relationship. Johnson and her colleagues developed the Attachment Injury Repair Model (AIRM), which is an effective, empirically validated approach used within EFT to heal attachment injuries (Halchuk et al., 2010; Johnson et al., 2001; Makinen & Johnson, 2006). Johnson (2005) proposed using this model with infidelity and laid out the general process of using EFT and the AIRM model with affairs. However, she did not address how to help ensure the infidelity has stopped, preventing it from starting again, and helping people understand why it happened and how it will not happen again. This is a gap in the model as applied to infidelity since understanding the motivations behind infidelity can be critical to ensure it has stopped, prevent it from starting again, and help people understand why it happened and why it will not happen again.

Purpose

In 2011, Woolley proposed seven types of affairs based on motivations. Girard et al. (2018), in a survey of 210 people who had affairs, found that all types were endorsed, and each type was related to insecure attachment styles. However, nothing has been published regarding how the typology can be used in therapy. Consequently, the purpose of this paper is to help fill this gap by discussing how this motivational typology can help treat infidelity using EFT. We begin by reviewing some of the basics of treating affairs and then discuss the seven motivational types of affairs and how they can help guide treatment.

General Treatment Recommendations

In this section, we outline some general recommendations not found in the existing EFT literature. In the following section, we discuss specific treatment suggestions based on the Woolley (2011) motivational categories and typology.

Initial Responses

When an affair is disclosed or discovered, it often results in significant emotional distress for the couple and those in their close circle that learn of the infidelity. It's important to reassure them that understanding and healing are possible (Zhao et al., 2024), and that they need to carefully manage disclosure to friends and family. It is valuable to strongly advise against sharing the affair on social media. If needed, the betrayed partner should seek support from a balanced, confidential source (Spring, 2020).

Avoiding Blame and Shame

People who have been unfaithful often attempt to mitigate their guilt and shame by blaming their primary partner, which exacerbates the emotional impact of their actions (May, 2023). While certain behaviors in a relationship may facilitate or hinder the likelihood of an affair, the responsibility for the affair lies with the individual who made the choice to engage in it (Fife et al., 2013; Shrout & Weigel, 2019). However, it is important to recognize that infidelity is often contrary to the betraying partners own values which can lead to shame. Shame frequently occurs when people make bad choices (Tangney et al., 2007). Shame is a disconnecting emotion that shifts the focus away from the injured partner's pain and toward the individual's sense of being fundamentally flawed. Addressing shame with betraying partners involves framing the actions as destructive while affirming that the individual is not inherently bad. The distress they feel indicates that their actions conflict with their deeper values, suggesting that their core self is aligned with positive moral standards, even though their behavior was bad or destructive.

Has the affair ended?

It is crucial for the therapist to determine if the affair has ended. This can be done by interviewing the betraying partner alone to understand the context of the affair, confirming if it has truly ended. If the affair has ended, the therapist should inquire about how it concluded, how the third party was informed, and whether there is still any communication with the third party. Any ongoing contact should be addressed and terminated, if at all possible, to support the healing process. If it is not immediately possible to end contact, efforts should be made to ensure that contact is limited, fully disclosed, and safe (Spring, 2020).

Disclosure

The full extent of the affair is frequently not disclosed before therapy, since betraying partners often fear their partner's reaction and feel shame about their actions (Drake & Caudill, 2019). However, complete and honest disclosure is generally essential for healing (Fife et al., 2013). Initial disclosure could occur with the therapist alone to help the betraying partner to prepare for a full disclosure in a couple session. The focus of disclosure should be on the healing of the betrayed partner rather than alleviating the betrayer's guilt or shame. To facilitate complete disclosure, it may help the betraying partner to write out the details of the affair(s) and review it in an individual session before verbal disclosure in the couple session. The written record should not be given to the betrayed partner and can usually be destroyed after full disclosure.

During disclosure, it is critical to manage emotional responses by allowing breaks and ensuring the betrayed partner's questions are directed toward healing rather than shaming (Fife et al., 2013). The pace should be set by the needs of the betrayed, not the betrayer. Full disclosure may require extended or multiple sessions to process effectively.

Obsession with Details

Healing for the betrayed partner often involves rewriting the history of their relationship. Focusing solely on details without addressing the attachment meanings and emotions can result in people becoming obsessed with the details (Fife et al., 2007) and can hinder the healing process (Fife et al., 2013). Shifting the focus to the emotional and attachment aspects of the details is essential. This involves connecting them to attachment-related meanings, validating and processing those emotions (Johnson, 2005).

Betrayed partners need to grieve the losses associated with the affair, such as the sense of stability, trust, safety, and feeling loved. Just as during all grieving processes, they need to feel, express, and organize their emotions,

be comforted, and develop new meanings around their losses. They also require breaks from grieving to focus on other activities and emotions. Exercise, socializing, and engaging in hobbies can help provide these necessary breaks (Glass & Staeheli, 2004; Snyder et al., 2008). Strategies to overcome obsessional thinking include turning to a safe person for comfort, shifting focus from thoughts to attachment emotions, writing about their thoughts and related emotions, setting times to focus on the pains of the betrayal and times for healthy distractions, and limiting questions about the infidelity to therapy sessions (Fife et al., 2013, Johnson, 2020).

Treatment Recommendations Based on Motivations

The motivations behind engaging in affairs are usually complex and multifaceted, and are influenced by a variety of psychological, contextual, and relational factors. However, understanding the basic motivations behind an affair is important both for ending ongoing affairs, preventing new affairs, and healing the injuries of affairs (Baucom et al., 2009).

Woolley (2011) proposed a typology that eventually included three broad motivational categories for engaging in affairs: relational, escape, and intrapsychic, which he further divided into seven types. Relationally motivated affairs were divided into *protest affairs*, *come and get me affairs*, and *burned-out affairs*. *Escape affairs* were not subdivided. Intrapsychically motivated affairs were divided into *hedge fund affairs*, *power player affairs*, and *compulsive affairs*.

Girard et al. (2018) found that all seven types were endorsed by people who had engaged in affairs, helping to validate the typology. They also found that the types were related to attachment styles, which is discussed under each type of affair. However, Girard et al. (2018) did not explore the details of how the typology can guide therapists, which is the purpose of this article.

Guidance for Healing Each Category and Type of Affair

Each of the recommendations below should be used within the framework of Emotionally Focused Couple Therapy (Johnson, 2020) and the attachment injury repair model (Johnson et al., 2001; Makinen & Johnson, 2006). The essence of the AIRM model involves several processes including validating the intense emotions of the injury, organizing and assembling them, and tying them to the attachment bond. This also means helping the unfaithful partner see their partner's pain and experience it as a reflection of how important they are, not as a reflection of their badness. It includes ensuring the injured partner experiences the unfaithful partner as understanding the pain and suffering of the injured partner at an emotional level, and as having deep remorse for their suffering. Lastly, it helps the couple reach to each other for comfort and connection to create healing bonding events. Throughout the process, the couple must develop a coherent narrative about what led to the injury and what will prevent it from happening again.

Using the Woolley (2011) typology to identify motivating factors early in the AIRM process can help stop affairs, make sense of affairs, and prevent future affairs. However, they typically are not given the labels to avoid stigmatization. Focusing on motivations is important either before or in the early part of the AIRM process. Additionally, most of the following recommendations focus on the person who had the affair, because understanding their motivations is key to stopping affairs, preventing future affairs, and making sense of the affairs. Given that the affair must be stopped before attachment injury repair can be done, seeking to understand the motivations for the affair early is important. Ultimately, both partners need to understand the motivations to help them develop a coherent narrative in the attachment injury repair model.

Healing Relationally Driven Affairs

One of the challenges of healing relationally driven affairs is that in addition to the damage from the affair, serious problems existed in the relationship before the affair. Both partners may have major pre-affair wounds, and both often also have wounds because of the affair (Timm & Hertlein, 2020). Consequently, it is easy for one or both members of the couple to become hopeless that things will change. It is important to watch for hopelessness and address it as it comes up (Johnson, 2008). When the therapist truly believes that a couple can get better, it often instills hope in the couple. It can also be helpful to be clear about healing the pre-affair distress in addition to the distress and problems stemming from the affair betrayal. Additionally, when a therapist explains the process of

healing, it can provide hope for couples. It is also important to recognize that there may be multiple “cycles” – a cycle before the affair and a cycle after the affair (Johnson, 2005, 2020). For example, sometimes partners who typically pursue may withdraw upon learning they have been betrayed. The therapist must work with the cycle that is alive at the time. However, it can be valuable to acknowledge the cycle that existed before the affair since this may have helped lead to the affair, and it may be easy to go back to the old cycle when the initial drama of the affair disclosure settles down.

Although the danger of unfaithful partners blaming faithful partners always exists (Fife et al., 2013), this can be particularly common when affairs are motivated by relationship problems. People who are primarily motivated by factors within the relationship are usually very hurt or upset by relational wounds before the infidelity and consequently may blame their partners or justify the affair based on the relationship, which can result in further damage.

1) *Healing Protest Affairs.* This type of affair is a reactive response to feeling hurt, rejected, or abandoned in the primary relationship. Participants may engage in such affairs as a form of protest or retaliation for the disconnection and hurt they feel in the primary relationship. People who have protest affairs are more likely to be anxiously attached (Girard et al., 2018); consequently, they may be more aware of their needs to connect and may still be motivated to repair and learn to connect in more constructive ways. However, their pain before the affair must be acknowledged and dealt with. Therapists working with these types of affairs need to balance treatment of the infidelity injuries with an acknowledgement and treatment of the injuries before the affair. Initially, the focus should be on managing the intense emotions in the present reactive cycle, to help calm the couple. Once the emotional distress is addressed, it is important to explore and deal with the previous cycle – the relational patterns and unmet attachment needs that contributed to the affair. It is critical that the relationship issues be acknowledged without blaming the betrayed partner (Vossler & Moller, 2014).

Because a protest affair is a destructive reaction to feeling hurt, rejected, or abandoned, it is essential that these individuals learn how to deal with relational problems within the relationship in functional ways. Like with all affairs, they need to learn to send clear signals regarding attachment longings, especially when they are afraid, feel hurt or abandoned. This is the heart and soul of the change process in EFT; consequently, standard EFT interventions and processes are typically very useful (Johnson, 2020).

2) *Healing Come and Get Me Affairs.* The motivation behind this type of an affair is typically to get the primary partner to pay attention to them by creating jealousy through involvement with another person. These types of affairs may not result in full sexual engagement and often occur in a way that the primary partner can learn about the affair. The hope of the unfaithful partner is that by engaging with a third person, their primary partner will get jealous and become more engaged in the relationship.

The person who has this type of affair is usually anxiously attached (Girard et al., 2018) and uses manipulative tactics to try to get their partner to connect. Because the motivation behind such affairs is to secure a stronger, more stable bond with the original partner, the person who engages in these types of affairs typically still wants to repair the relationship. However, they can fall into hopelessness because “even me having an affair didn’t bring my partner back.” A central part of treatment is to work on being able to directly ask for and receive comfort and connection from the primary partner rather than resorting to manipulation (Johnson, 2020). Understanding the betraying partner’s strategy and related emotions can help the couple understand that the infidelity was a destructive attempt to restore connection, which can help the betrayed partner not feel as rejected. Focusing on the desired outcome (safe connection) and understanding healthy and unhealthy ways of gaining that outcome is key.

3) *Healing Burned-out Affairs.* People who have burned-out affairs typically have lost hope that the relationship will work. They are often either ambivalent about ending the relationship or they would like to end it but have a hard time doing so directly. Consequently, they engage in an affair not only to seek comfort and validation but also to experiment with a new relationship to help them leave the old relationship. In treating this type of affair, one of the biggest challenges is getting the person who had the affair to commit to staying in the relationship and fully engaging in therapy. The therapist needs to address the pain of the burned-out partner that contributed to the unfaithful behavior, as well as the pain of the betrayed partner. Validating the betraying partner’s pain that led them to infidelity and acknowledging their effort in engaging in therapy to improve the relationship can be essential. The therapist should help the couple understand the negative cycle that led to the burn-out and how it can change to help foster hope for the relationship’s future (Johnson, 2020). It is important to identify hopelessness as a disconnecting emotion, work to understand what led to the hopelessness, lay out how EFT can bring about fundamental changes, and help them realistically come to believe that real change is possible through hard work and effort.

Healing Romantic Escape Affairs

When life pressures build up and a person does not turn to their partner for comfort and support, it can lead to escaping into a romantic affair (Pittman, 1990; Weiser et al., 2022). Although most affairs involve some type of escape, for this type of affair, escape is a primary motivation for the affair. Pittman (1990) noted that the excitement of secrecy and romance provides a powerful distraction from the stresses of life. Consequently, these affairs are often ongoing and involve the power of romance (Weiser et al., 2022).

Romantic Escape affairs typically involve both distress and relational distance. The distress is not necessarily related to the relationship, but rather to problems at work, financial problems, depression etc. Rather than turning to their primary partner for comfort, they go outside the relationship and escape to a world of romance, danger, and excitement. These types of affairs can sometimes go on for many years and can involve setting up a life with each partner. When things get stressful in one relationship, they escape to the other relationship and may go back and forth for years.

One of the biggest challenges with escape affairs can be getting them ended. The power and excitement of secrecy and lies must be stopped. Pittman (1990) advocated getting all three together in a session to end the power of secrecy. This should only be done by experienced therapists. Even without getting the three people together in a session, ending the secrecy and lies helps end the affair and should be a focus of therapy.

It is critical to help unfaithful partners learn to be aware of their emotional needs and deal with distress honestly and openly in healthy ways (Johnson, 2020). As they gain awareness of their emotions and learn to talk about them, they will be in a better position to take healthy steps to gain comfort. It is essential that they eventually learn to turn to their primary partner for comfort and connection rather than trying to escape distress. This will usually not work at first since the betrayed partner is wounded and usually very upset. However, when the betrayed partner's wounds have been processed, it can help them to understand that the partner's infidelity was a destructive way of dealing with stress. This can help the affair feel less personal and can also help betrayed partners see how important it is for the unfaithful partner to turn to them for comfort, as well as engaging in other healthy ways to deal with distress.

Healing Intrapsychically Driven Affairs

Most intrapsychic issues are rooted in past disconnections and traumas. Consequently, doing a careful history of and working to heal past traumas is essential. Individual and group therapy are often an important addition to couple work. However, it is important to remember that because the wounds arose in previous attachment relationships, having corrective emotional experiences with a current attachment figure is important to bring about deep and lasting healing. Creating enough safety with betrayed partners takes time and typically occurs later in the AIRM process.

1) *Healing Hedge Fund Affairs.* People who are hedging their bets by engaging in an affair typically believe others will not stay long term. They tend to have an anxious attachment style (Girard et al., 2018) and engage in affairs as a preventative safeguard against what they believe will be inevitable abandonment, maintaining a stance that relationships are destined to fail. It is common for them to have had multiple relationships that ended when they became involved with a new partner.

Helping them see their own pattern, recognize and process their attachment fears, and recognize and experientially correct their underlying working models around people not being there and their own unworthiness is important. This should be done not only through identifying their internal working models of attachment, but also through creating corrective emotional experiences with an engaged partner (Johnson, 2020). They need to experience repairing the couple relationship and turning to their partner for comfort with their attachment related fears. This can be powerful since once they see the damage of the affair, it can further activate the attachment fears that the other will not stay and activate the strategy to seek a new partner. When the attachment fears are activated and they turn to their present partner for comfort rather than to a third person, it can result in corrective emotional experiences that change the underlying working models of attachment (Johnson, 2020).

2) *Healing Power Player Affairs.* People who engage in these types of affairs typically view romantic relationships as fundamentally unsafe, and they seek to gain a sense of security through seeking power, which they feel through having affairs. Love is often disconnected from sex for these people. They may have characteristics associated with the "Dark Triad" – narcissism, psychopathy, and Machiavellianism (Algelt et al., 2022) which can lead to seeking power professionally and in other areas. Power player affairs often involve short, intense sexual encounters,

and may stem from deep gender-related fears and wounds (Pittman, 1990). Heterosexual men may see bedding women as a way of gaining reassurance that they are men. They often turn to affairs when they are stressed or feeling insecure. Heterosexual women may see these types of affairs as a way of gaining power over men while avoiding vulnerability (Pittman, 1990).

It can be hard to get these types of affairs stopped. It is important that the underlying desire for power and control as a strategy to deal with fears and insecurity be recognized and replaced with more functional strategies. Additionally, gender-related wounds must be processed, and the person needs to learn to find safety in being honest, open, and vulnerable. Treatment needs to involve exploring the attachment related emotions that come up just before they seek out an affair, how they feel during the affair, and then exploring how this may be related to gender associated beliefs, wounds and fears. Pittman (1990) recommends group therapy where the focus is on gender issues. The focus of therapy, regardless of modality, needs to be on reworking underlying working models of attachment through creating corrective emotional experiences with the primary partner. As with other types of affairs, it may take some time before the betrayed partner is ready to provide comfort.

3) Healing Compulsive Affairs. Affairs driven by compulsion are characterized by disconnected sexual encounters such as one-night stands, seeing prostitutes, and compulsive pornography use. The emotional function of the affairs is typically to numb or distract from emotional pain. Often regarded as hypersexual behavior or sexual addiction (Grubbs et al., 2020), these affairs require addressing underlying compulsive/addiction issues along with developing secure attachment with the primary partner. Referring people to sexual addiction specialists and 12 step groups may be helpful (Carnes, 2015). Partners can also benefit from bibliotherapy focused specifically on partners of people with sexual addiction (e.g. Carnes, 2020).

People who engage in compulsive affairs tend to have limited emotional awareness (Reid et al., 2008). Consequently, an important focus of treatment involves helping the unfaithful partner expand their emotional awareness and develop ways of dealing with emotional distress that are not destructive. Asking the question “what percentage of time this week were you aware of your emotions” can be helpful. Keeping an emotional journal to check in and write down emotions, the context, and what they did with their emotions several times a day can also be useful (Johnson, 2022). The goal is to help betraying partners become aware of their process of emotion (Johnson, 2020), what triggers emotions, their bodily response, how they make sense of them, and what they do with them. The more awareness the person has, the more the therapist can help them develop new strategies to handle them such as openly processing them, writing them down, altering their circumstances, and most importantly, turning to their partner for comfort.

Conclusion

This article is the first to address how to use the Woolley's (2011) affairs typology as part of the attachment injury repair process in Emotionally Focused Couples Therapy (Johnson, 2020). In Girard and colleagues' (2018) study of 210 people who had affairs, each motivational type was endorsed and tied to attachment insecurity. However, there was no mention of how to use them in treatment. Additionally, motivations for affairs were not addressed in Johnson's (2005) article on affairs. The present article helps fill these gaps by laying out how the Woolley (2011) motivational typology can be used to guide treatment.

Specifically, this paper laid out the importance of gaining an understanding of motivations for the infidelity and addressing them as a way of stopping infidelity, ensuring it does not happen again, and creating a coherent narrative as part of the AIRM process (Johnson et al., 2001). Motivations rooted in relational problems, romantic escape, and intrapsychic factors are reviewed along with specific recommendations for each subtype, which can guide clinicians in organizing the direction of treatment.

This article does not go into details about the change processes and techniques of EFT or the AIRM, which can be found in existing literature (Johnson, 2020; Makinen & Johnson, 2006). The article does focus on identifying the motivations behind the infidelity as being important early in the AIRM process of healing.

The recommendations in this article come from both clinical experience and research literature. However, there has been no outcome research on the use of this typology and the recommendations in this article. Consequently, using these recommendations must be done with caution. Empirically testing these recommendations is an important recommendation for future research. Additionally, although each of the motivations were endorsed in the Girard et al. (2018) study, there could be other motivating factors. Exploring this possibility could also be a focus for future research.

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Author contribution

Scott R. WOOLLEY: conceptualization, cowriting original draft, writing review and editing.
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References

Algelt, E. E., McNulty, J. K., & Meltzel, A. L. (2022). Are certain people more prone toward infidelity? Own and partner personality and individual difference predictors of infidelity. In T. DeLecce & T. K. Shackelford (Eds.), *The Oxford handbook of infidelity* (pp. 3–27). Oxford University Press.
<https://doi.org/10.1093/oxfordhb/9780197502891.013.1>

Amato, P. R., & Previti, D. (2003). People's reasons for divorcing: Gender, social class, the life course, and adjustment. *Journal of Family Issues*, 24(5), 602–626.
<https://doi.org/10.1177/0192513X03024005002>

Asvadi, M., Bakhshipoor, A., & Tabadkan, B. Z. R. (2022). Comparing the effectiveness of emotionally focused couple therapy and cognitive-behavioral couple therapy on forgiveness and marital intimacy of women affected by infidelity in Mashhad. *Journal of Community Health Research*, 11(4).
<https://doi.org/10.18502/jchr.v11i4.11644>

Baucom, D. H., Snyder, D. K., & Gordon, K. C. (2009). Helping couples get past the affair: A clinician's guide. Guilford Press.

Beasley, C. C., & Ager, R. (2019). Emotionally focused couples therapy: A systematic review of its effectiveness over the past 19 years. *Journal of Evidence-Based Social Work*, 16(2), 144–159.
<https://doi.org/10.1080/23761407.2018.1563013>

Braithwaite, S. R., Coulson, G., Keddington, K., & Fincham, F. D. (2015). The influence of pornography on sexual scripts and hooking up among emerging adults in college. *Archives of Sexual Behavior*, 44(1), 111–123.
<https://doi.org/10.1007/s10508-014-0351-x>

Carnes, P. (2015). *Facing the shadow: Starting sexual and relationship recovery* (3rd ed.). Gentle Path Press.

Carnes, P. J., & Adams, K. M. (Eds.). (2020). *Clinical management of sex addiction* (2nd ed.). Routledge.

Davala, M. A. & Mims, G. A. (2024). Monogamy and consensual non-monogamy fidelity preventing relationship crisis. In P. R. Peluso & T. J. Irvine (Eds.), *Infidelity: A practitioner's guide* to working with couples in crisis (*Family Systems Counseling: Innovations Then and Now*) (2nd ed., pp. 21–37). Taylor & Francis.
<https://doi.org/10.4324/9781003314776-4>

Drake, D. & Caudill, J. (2019). *Full disclosure: How to share the truth after sexual betrayal*. Independently Published.

Fife, S. T., Weeks, G. R., & Gambescia, N. (2007). The inter-systems approach to treating infidelity. In P. R. Peluso (Ed.), *Infidelity: A practitioner's guide to working with couples in crisis* (pp. 71–97). Routledge/Taylor & Francis Group.

Fife, S. T., Weeks, G. R., & Stellberg-Filbert, M. (2013). Facilitating forgiveness in the treatment of infidelity: An interpersonal model. *Journal of Family Therapy*, 35(4), 343–367.
<https://doi.org/10.1111/j.1467-6427.2011.00561.x>

Fincham, F. D., & May, R. W. (2017). Infidelity in romantic relationships. *Current Opinion in Psychology*, 13, 70–74.
<https://doi.org/10.1016/j.copsyc.2016.03.008>

Fitzgerald, C. J., Moreno, C. & Thompson, J. (2022). Predicting online infidelity. In T. DeLecce & T. K. Shackelford (Eds.), *The Oxford handbook of infidelity* (pp. 153–171). Oxford University Press.
<https://doi.org/10.1093/oxfordhb/9780197502891.013.8>

Girard, A., Connor, J. J., & Woolley, S. R. (2018). An exploratory study of the role of infidelity typologies in predicting attachment anxiety and avoidance. *Journal of Marital and Family Therapy*, 46(1), 124–134.
<https://doi.org/10.1111/jmft.12371>

Glass, S. P. & Staeheli, J. C. (2004). *Not "just friends": Rebuilding trust and recovering your sanity after infidelity*. Free Press.

Gonzales, A. L., & Hancock, J. T. (2011). Mirror, mirror on my Facebook wall: Effects of exposure to Facebook on self-esteem. *Cyberpsychology, Behavior, and Social Networking*, 14(1–2), 79–83.
<https://doi.org/10.1089/cyber.2009.0411>

Grubbs, J. B., Hoagland, K. C., Lee, B. N., Grant, J., Davison, P., Reid, R. C., & Kraus, S. W. (2020). Sexual addiction 25 years on: A systematic and methodological review of empirical literature and an agenda for future research. *Clinical Psychology Review*, 82, Article 101925. <https://doi.org/10.1016/j.cpr.2020.101925>

Halchuk, R. E., Makinen, J. A., & Johnson, S. M. (2010). Resolving attachment injuries in couples using emotionally focused therapy: A three-year follow-up. *Journal of Couple & Relationship Therapy*, 9(1), 31–47. <https://doi.org/10.1080/15332690903473069>

Hertlein, K. M., & Piercy, F. P. (2006). Internet infidelity: A critical review of the literature. *The Family Journal*, 14(4), 366–371. <https://doi.org/10.1177/1066480706290508>

Johnson, S. M. (2005). Broken bonds: An emotionally focused approach to infidelity. *Journal of Couple & Relationship Therapy*, 4(2–3), 17–29. https://doi.org/10.1300/J398v04n02_03

Johnson, S. M. (2008). *Hold me tight: Seven conversations for a lifetime of love*. Little, Brown & Co.

Johnson, S. M. (2020). *The practice of emotionally focused couple therapy: Creating connections* (3rd Ed.). Routledge. <https://doi.org/10.4324/9781351168366>

Johnson, S. M. (2022). *The hold me tight workbook (A couple's guide for a lifetime of love)*. Routledge. Little, Brown & Co.

Johnson, S. M., Hunsley, J., Greenberg, L., & Schindler, D. (1999). Emotionally focused couples therapy: Status and challenges. *Clinical Psychology: Science and Practice*, 6(1), 67–79. <https://doi.org/10.1093/clipsy.6.1.67>

Johnson, S. M., Makinen, J. A., & Millikin, J. W. (2001). Attachment injuries in couple relationships: A new perspective on impasses in couples therapy. *Journal of Marital and Family Therapy*, 27(2), 145–155. <https://doi.org/10.1111/j.1752-0606.2001.tb01152.x>

Lebow, J. L., Chambers, A. L., Christensen, A., & Johnson, S. M. (2012). Research on the treatment of couple distress. *Journal of Marital and Family Therapy*, 38(1), 145–168. <https://doi.org/10.1111/j.1752-0606.2011.00249.x>

Makinen, J. A., & Johnson, S. M. (2006). Resolving attachment injuries in couples using emotionally focused therapy: Steps toward forgiveness and reconciliation. *Journal of Consulting and Clinical Psychology*, 74(6), 1055–1064. <https://doi.org/10.1037/0022-006x.74.6.1055>

Mark, K. P., Garcia, J. R., & Fisher, H. E. (2015). Perceived emotional and sexual satisfaction across relationship contexts: Gender and sexual orientation differences and similarities. *The Canadian Journal of Human Sexuality*, 24(2), 120–130. <https://doi.org/10.3138/cjhs.242-A8>

May, M. (2023). *The betrayal bind: How to heal when the person you love the most hurts you the worst*. Central Recovery Press.

McKenna, K. Y., & Bargh, J. A. (2000). Plan 9 from cyberspace: The implications of the Internet for personality and social psychology. *Personality and Social Psychology Review*, 4(1), 57–75. https://doi.org/10.1207/S15327957PSPR0401_6

Najibzadegan, A., Bahrainian, S. A., & Shahabizadeh, F. (2024). Effectiveness of emotionally focused couple therapy on intimacy, marital forgiveness, and marital burnout in women affected by extramarital affairs. *Journal of Adolescent and Youth Psychological Studies*, 5(7), 23–32. <https://doi.org/10.61838/kman.jayps.5.7.3>

Pittman, F. (1990). *Private lies: Infidelity and the betrayal of intimacy*. W.W. Norton & Company.

Randall, A. K., & Bodenmann, G. (2017). Stress and its associations with relationship satisfaction. *Current Opinion in Psychology*, 13, 96–106. <https://doi.org/10.1016/j.copsyc.2016.05.010>

Reid, R. C., Carpenter, B. N., Spackman, M., & Willes, D. L. (2008). Alexithymia, emotional instability, and vulnerability to stress proneness in patients seeking help for hypersexual behavior. *Journal of Sex & Marital Therapy*, 34(2), 133–149. <https://doi.org/10.1080/00926230701636197>

Robles, T. F. (2014). Marital quality and health: Implications for marriage in the 21st century. *Current Directions in Psychological Science*, 23(6), 427–432. <https://doi.org/10.1177/0963721414549043>

Robles, T. F., Slatcher, R. B., Trombello, J. M., & McGinn, M. M. (2014). Marital quality and health: A meta-analytic review. *Psychological Bulletin*, 140(1), 140–187. <https://doi.org/10.1037/a0031859>

Rokach, A., & Chan, S. H. (2023). Love and infidelity: Causes and consequences. *International Journal of Environment Research in Public Health*, 20(5) Article 3904. <https://doi.org/10.3390/ijerph20053904>

Shroud, M. R., & Weigel, D. J. (2019). “Should I stay or should I go?” Understanding the noninvolved partner’s decision-making process following infidelity. *Journal of Social and Personal Relationships*, 36(2), 400–420. <https://doi.org/10.1177/0265407517733335>

Spring, J. A. (2020). *After the affair: Healing the pain and rebuilding trust when a partner has been unfaithful* (3rd ed.). HarperCollins.

Smith, T. W., Cribbet, M. R., Nealey-Moore, J. B., Uchino, B. N., Williams, P. G., Mackenzie, J., & Thayer, J. F. (2011). Matters of the variable heart: Respiratory sinus arrhythmia response to marital interaction and associations with marital quality. *Journal of Personality and Social Psychology*, 100(1), 103–119. <https://doi.org/10.1037/a0021136>

Snyder, D. K., Baucom, D. H., & Gordon, K. C. (2008). An integrative approach to treating infidelity. *The Family Journal*, 16(4), 300–307. <https://doi.org/10.1177/1066480708323200>

Spengler, P. M., Lee, N. A., Wiebe, S. A., & Wittenborn, A. K. (2024). A comprehensive meta-analysis on the efficacy of emotionally focused couple therapy. *Couple and Family Psychology: Research and Practice*, 13(2), 81–99. <https://doi.org/10.1037/cfp0000233>

Stavrova, O., Pronk, T., & Denissen, J. (2023). Estranged and unhappy? Examining the dynamics of personal and relationship well-being surrounding infidelity. *Psychological Science*, 34(2), 143–169. <https://doi.org/10.1177/09567976221116892>

Tangney, J. P., Stuewig, J., & Mashek, D. J. (2007). Moral emotions and moral behavior. *Annual Review of Psychology*, 58, 345–372. <https://doi.org/10.1146/annurev.psych.56.091103.070145>

Timm, T., & Hertlein, K. (2020). Affair recovery in couple therapy. In K. S. Wampler & A. J. Blow (Eds.), *The handbook of systemic family therapy: Systemic family therapy with couples* (pp. 343–361). Wiley Blackwell.

Troxel, W. M., Robles, T. F., Hall, M., & Buysse, D. J. (2007). Marital quality and the marital bed: Examining the covariation between relationship quality and sleep. *Sleep Medicine Reviews*, 11(5), 389–404. <https://doi.org/10.1016/j.smrv.2007.05.002>

Vossler, A., & Moller, N. P. (2014). "The relationship past can't be the future": Couple counsellors' experiences of working with infidelity. *Sexual and Relationship Therapy*, 29(4), 424–435.
<https://doi.org/10.1080/14681994.2014.924619>

Wang, Y., Jiao, Y., Nie, J., O'Neil, A., Huang, W., Zhang, L., Han, J., Li, H., Zhu, Y., & Woodward, M. (2020). Sex differences in the association between marital status and the risk of cardiovascular, cancer, and all-cause mortality: A systematic review and meta-analysis of 7,881,040 individuals. *Global Health Research and Policy*, 5, Article 4.
<https://doi.org/10.1186/s41256-020-00133-8>

Warach, B., & Josephs, L. (2019). The aftershocks of infidelity: A review of infidelity-based attachment trauma. *Sexual and Relationship Therapy* 36(1), 68–90.
<https://doi.org/10.1080/14681994.2019.1577961>

Weiser, A., Pickens, J. C. & Thomas A. V. (2022). Long-term infidelities. In T. DeLecce & T. K. Shackelford (Eds.), *The Oxford handbook of infidelity* (pp. 315–348). Oxford University Press.
<https://doi.org/10.1093/oxfordhb/9780197502891.013.17>

Woolley, S. R. (2011, June 3). *Healing Affairs Using Emotional Focused Therapy* [Workshop Presentation]. Training and Research Institute for EFT, San Diego, CA.

Zhao, J., Sohn, A., & Tadros, E. (2024). Disability and infidelity with a cross-cultural couple: An emotionally focused therapy case study. *Person-Centered & Experiential Psychotherapies*, 1–23.
<https://doi.org/10.1080/14779757.2024.2402694>

PERSPECTIVE ARTICLE

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The Marriage and Family Therapy Practice Research Network: Current Findings and a Call for Collaboration

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Introduction: Mental health problems continue to rise throughout the world while access to care remains problematic due to low affordability and limited therapist availability. With the mental health crisis only getting worse, clinicians and researchers must work together to improve client outcomes. The Marriage and Family Therapy Practice Research Network (MFT-PRN) was established to improve client care and foster collaborative research in systemic therapy. This project balances research rigor and clinical flexibility, making it accessible and beneficial for practitioners, clients, and researchers.

Areas covered: This paper will address the above issues by discussing how the MFT-PRN brings researchers and clinicians together, through routine outcome monitoring (ROM) and providing assessments that track client progress across sessions, allowing clinicians to create better treatment plans. We will also discuss how the MFT-PRN facilitates researcher collaboration by sharing data collected across diverse settings.

Expert opinion: Professional experience and research findings suggest that using the MFT-PRN enhances therapy outcomes, reduces treatment length, and improves couple and family relationships. The MFT-PRN has facilitated research that leads to improved client care in areas such as therapeutic alliance, teletherapy efficacy, and the impact of adverse childhood experiences on anxiety.

Conclusion: By bringing practitioners and researchers together, the MFT-PRN contributes significantly to advancing marriage and family therapy.

Keywords: Marriage and Family Therapy, Practice Research Network, Routine Outcome Monitoring, research

Introduction

The need for efficacious psychotherapy is great, since in 2019, one in eight people experienced mental illness, and global mental illness rates have only increased due to the COVID-19 pandemic (World Health Organization, 2022). An additional indicator of the current crisis is the cost of mental health care around the world. Currently, global mental health costs are estimated at \$381.31 billion and predicted to grow to \$537.91 billion by the year 2030 (Duszynski-Goodman, 2024). Between 2019 and 2021, the percentage of United States adults who had received treatment for mental health in the previous year increased from 19.2% to 21.6% (Terlizzi & Schiller, 2022),

equaling 55.8 million people that received therapy between 2021 and 2022 (Vankar, 2024). In Europe, nearly a quarter of the population reported having at least one mental health illness (Simon et al., 2023; Statista Research Department, 2024). The trend of increasing problems also applies to relationship problems with global trends indicating that divorce rates in South Korea, Norway, and the United Kingdom have tripled since the 1970s (Ortiz-Ospina & Roser, 2020). This trend is not true across all countries, with divorce rates in many countries, including the United States, having declined since then (Wang, 2020). It is unknown whether this decline is due to lower marriage and higher cohabitation rates, or happier, more stable marriages (Ortiz-Ospina & Roser, 2020; Wang, 2020). Further, global statistics indicate that nearly one in three women has been physically and/or sexually abused (United Nations Women, 2023), and between 10–52% of men have experienced intimate partner violence within their marriages (Krug et al., 2002).

With mental health and relationship problems on the rise, many countries also report that mental health care has been harder to access. For example, according to a survey from 2022, 90% of United States adults believe there is a mental health crisis in the United States, yet a third of the respondents experienced barriers to accessing mental health services (Lopes et al., 2022). Accordingly, 80% of the respondents cited cost as the main barrier, and 60% reported stigma as the barrier that kept them from receiving care. Despite the high prevalence of mental illness and the rising demand for services, many people still struggle to find or access care. A study done in Europe found that over 25% of its respondents were not able to access mental health treatment during the COVID-19 pandemic (Statista Research Department, 2024). Another study using data from the 2017–2018 National Health Interview Survey deemed non-affordability as the biggest predictor of inaccessibility (Coombs et al., 2021) and another global study found that stigma, policy, lack of human resources, and poor distribution of services decrease the availability of mental health services (Wainberg et al., 2017).

This brief review demonstrates the increasing prevalence of mental health and relational difficulties. When these increases are viewed in the context of the heightened difficulty of finding good care, it makes a case for therapists to use all available resources to ensure quality care. It also points to the need for increased collaboration to solve the current problems. One way to foster collaboration is by using practice research networks (PRN) and routine outcome monitoring (ROM) to improve client care. A practice research network allows researchers and practitioners to come together to collect larger, more diverse data to better understand change processes. ROM used within a PRN allows therapists to track client progress, create more comprehensive treatment plans, and make corrections to treatment plans throughout the treatment.

Routine Outcome Monitoring (ROM)

ROM is the formalized process of routinely monitoring clients' progress toward outcomes. ROM adds an additional data point and helps clinicians track client data to serve as an addition to the therapist's intuition. While intuition is valuable, additional data is necessary because therapists have been found to be imperfect predictors of client outcomes, indicating that clients are progressing more than they actually are (Johnson et al., 2017). The use of continuous assessments helps clinicians have more accurate knowledge of how their clients are progressing, or not progressing, and aids in identifying barriers to successful treatment. Further, it has been found that continuous assessments help increase the success of couple therapy (Anker et al., 2009; Halford et al., 2012; Johnson et al., 2017).

For research, ROM is instrumental in providing data for researchers on an ongoing basis. Further, the ease of implementing ROM systems expands their use to clinics beyond university-based training and research laboratories that typically have small sample sizes and limited generalizability. Using ROM within a practice research network (PRN) addresses these limitations by providing a large and geographically diverse sample through collecting data from various clinical settings where therapy is practiced.

Many available systems facilitate implementing ROM within a PRN and a review of all these systems is beyond the scope of this paper. Instead, it will focus on one ROM system—The Marriage and Family Therapy Practice Research Network (MFT-PRN; Johnson, et al., 2017). Our article will provide a brief introduction to the MFT-PRN (for more information on the MFT-PRN see Johnson, et al. 2017, or www.mft-prn.net) and provide a summary of findings from MFT-PRN data. We hope that this review will highlight the collaboration that has occurred and the progress made toward improving client care.

The Marriage and Family Therapy Practice Research Network (MFT-PRN)

A practice research network (PRN) includes a group of practices/clinics that work together as practitioners and researchers to improve client outcomes (Johnson et al., 2017). PRNs provide an opportunity for both evidence-based practice and practice-based research to occur. PRNs began in the medical field and are now used in numerous disciplines. Before the MFT-PRN, the closest things that the field of Marriage and Family Therapy had to a PRN were the Systemic Therapy Inventory of Change (STIC; Pinsof et al., 2009), and the Systemic Practice Research Network (SYPRENE; Vitry et al., 2020). STIC is a system that helps track client feedback on clinical outcomes (Pinsof et al., 2009) and SYPRENE is an international research network for systemic therapists doing strategic therapy (Vitry et al., 2020). While STIC monitors clinical feedback, it is not a practice research network that provides shared data nor a network of researchers and practitioners collaborating across clinics, and SYPRENE is narrow in scope as it focuses on strategic therapy only. Accordingly, the MFT-PRN was created to enable researchers and clinicians to work together to improve client care and to have shared access to a large amount of clinical data for the systemic treatment of mental illness and relationship problems (Johnson et al., 2017).

The MFT-PRN is a web-based system that delivers routine assessments to clients in participating clinics that is fully funded by donors to the authors' institution—participating clinics bear no cost (Johnson et al., 2017). The MFT-PRN balances the needs of research (consistency) with the needs of clinics and therapists (flexibility) in developing policies, procedures, and the choice of some assessments. While research focuses on "Does this treatment work for the average client?" practice needs to focus on "Does the treatment work for the clients (individual, couple, or family) I am currently seeing?" The timing of assessments, and short every-session assessments are consistent across sites. While demographics are generally consistent across sites, appropriate cultural adaptations are incorporated. Flexibility is achieved by allowing clinics, therapists, and clients, to have a voice in what assessments are completed and having the MFT-PRN be flexible enough to work within a very wide range of clinic policies.

Procedures and Assessments

Currently, there are two main assessment categories: 1) assessments that all clients take and 2) assessments chosen by the clinic. Assessments that all clients take include demographics, and short assessments taken before every therapy session (ratings of presenting problem progress, a questionnaire of individual or relationship functioning, and a questionnaire on the therapy alliance). Assessments chosen by the clinic are from the MFT-PRN assessment menu. Questionnaires for the menu have been screened for acceptable reliability, validity, sensitivity to change, and clinical utility. All data are encrypted in transit and during storage, and data protection policies and procedures ensure client confidentiality.

Procedurally, before the first therapy session, clients fill out the demographics and clinic-chosen assessments—the demographic questions take approximately 20 minutes to complete and the length of time to complete the clinic-chosen assessments varies. Clinic-chosen assessments are administered every 4th, 8th, 12th, 16th, and multiples of 8 sessions thereafter. Furthermore, three key assessments: progress on presenting problems (Presenting Problem Progress Questionnaire), relationship functioning (Couple Relationship Scale or Family Relationship Scale), or individual functioning (Intersession Report), and therapy alliance (Individual, Couple, or Family Intersession Alliance Measures), are completed before each session—the every session assessment takes 2 minutes to complete. For more information on assessments available within the MFT-PRN, see <https://www.mft-prn.net/assessments>.

A link to questionnaires can be sent directly to clients via email or text message. The MFT-PRN also generates a QR code to scan and thus administer the questionnaires in person. Assessments are scored in real time and then displayed graphically for easy interpretation, helping clinicians visually track client progress and easily see when client progress deteriorates. Clinicians can also access the completed assessment to view client responses to individual questions. Where available, clinical cut-off scores are shown on the graphs.

Currently, MFT-PRN staff are working on including a screening questionnaire taken before the first session by clients that will determine what questionnaires clients complete. Additionally, therapists will have the ability to add theory-specific questionnaires, such as differentiation, and clinics will be able to add required questionnaires for all clients at their clinic.

To allow more therapists and clients to benefit from the MFT-PRN, the portal and questionnaires are available in English, Spanish, French, Hungarian, Portuguese, Turkish, Korean, Japanese, Chinese (traditional and simplified), and Mongolian. We are currently working on additional translations. (See www.mft-prn.net for an up-to-date list of available languages.) As is evident from the multiple available languages and the current endeavor to offer ad-

ditional languages, the MFT-PRN has gained the attention of the international community. We are interested in welcoming new partners from other countries and we have protocols in place to help facilitate the needed translations.

Table 1. Benefits and Costs of the MFT-PRN for Varying Clinical and Research Roles

	Benefits	Costs
Clients	Better clinical care through improving therapy outcomes for clients (Bickman et al., 2011; Shimokawa et al., 2010), doubling the amount of progress in couple cases (Anker et al., 2009; Reese et al., 2010), decreasing the number of sessions, and giving clients a voice in their therapy experience (Johnson et al., 2017).	Costs may include loss of time to complete assessments, the irrelevance of some of the questions, and frustration with the overall process, which may translate to a lower therapeutic alliance (Johnson et al., 2017).
Therapists	Measure client progress and intentionally modify treatment to enhance outcomes (Anker et al., 2009), provide a rational for specific treatments, save time by gathering a lot of information before each session, and identify weaknesses to improve on and increase ethical practice (Johnson et al., 2017).	Push-back from clients on the time it takes to fill out the assessments, and opportunity cost arising from sending and checking assessments (Johnson et al., 2017).
Researchers	Data to study specific therapeutic processes and outcomes (Howard et al., 1996; Laurenceau et al., 2007; Pinsof & Wynne, 2000). Large and diverse samples for research (Johnson et al., 2017).	Opportunity costs as less focus may be directed at other projects, and research questions are limited to the information that the applied measures collect (el-Guebaly & Atkinson, 2004; Johnson et al., 2017).
Clinical Directors	Helping them track the effectiveness of their therapists and client progress, providing an opportunity to use data to secure funding, and to help identify areas for clinic training (Johnson et al., 2017).	Time and energy of implementing a new procedure, costs of technology to distribute and take the assessments, and potential push-back from clients or therapists on the time constraints of taking and reviewing the assessments (Johnson et al., 2017).

Benefits and Costs

When implementing any new procedures in a clinic, there is an adjustment period. To help in the decision-making process, see **Table 1** for a summary of the potential benefits and costs of implementing a ROM project such as the MFT-PRN.

The main benefits of the MFT-PRN are improved client care with clients making changes more quickly. Therapists can also gain a large amount of information about their clients before the first session, and then, with subsequent information, change treatment plans as necessary. Finally, the MFT-PRN has generated, to our knowledge, the largest database on couple and family therapy. Further, with multiple clinics using the MFT-PRN, collaboration on improving client care is increased. In addition to collaboration on client treatment, the MFT-PRN fosters research collaboration.

Researcher Accessibility to Archival Data

A benefit of PRNs to researchers is a large sample of relational and clinical data. Further, a large more diverse database for research benefits clinicians because clients seen by most therapists are different from participants in a randomized controlled trial. Thus, research on clients from treatment as usual settings will be more applicable to the daily practice of most therapists. To build additional research collaborations, clinics participating in the MFT-PRN desiring archival data for research can send a proposal of the requested research questions, project details, key references, a plan of analysis, and a letter of approval from the researcher's Institutional Review Board. This information is then reviewed and approved by the MFT-PRN executive committee, ensuring that duplicate studies are not created and connections between researchers can be encouraged. Finally, to further protect the identity of participants, MFT-PRN data are de-identified for all research.

The MFT-PRN has been helping to improve client care while building a large research database since 2017. Researchers are collaborating on publications that inform practice. As this is an important part of the MFT-PRN's mission, we are going to provide a summary of the completed research to highlight progress as well as encourage other researchers and clinicians to join the collaboration.

Summary of the MFT-PRN Research

To date, thirteen articles using MFT-PRN data have been published, fifty more articles are in progress, and many of these articles are done by researchers outside the authors' institution. This summary does not include a large number of presentations, dissertations, and theses using MFT-PRN data. Our goal is to provide a summary of the key topics and how these findings can improve client care. Key findings hail from the areas of questionnaire development, the therapy alliance, findings related to therapy outcomes, and the use of teletherapy.

Questionnaire Development

Due to some questionnaires being completed during every session, these must be reliable, valid, sensitive to change, and as short as possible. While many quality questionnaires exist, one that met all criteria was not available for some key variables that are important to clinicians and researchers.

Accordingly, a questionnaire to assess couple relationships was developed—the 10-item Couple Relationship Scale (CRS) was created by Anderson and colleagues (2021) to assess aspects of a couple's relationship routinely and quickly. This one-dimensional questionnaire includes items assessing emotional intimacy, commitment, trust, safety, cohesion, acceptance, conflict, physical intimacy, overall happiness, and personal well-being. The questionnaire has strong concurrent and construct validity, good reliability, a reliable change index, and a clinical cut-off. To be most useful, the CRS must be taken consistently, which requires client buy-in. To help increase client buy-in, the authors recommend 1) informing clients of the importance of routinely taking the CRS and other assessments, and 2) discussing the results of the CRS with clients in session, including the rate and direction of change. The authors also recommend that clinicians view the couple's scores before the first session and specifically note if their score is above or below the clinical cutoff, comparing partner scores to see how they each perceive the relationship, and looking at individual scores to identify problem areas and strengths within the relationship.

As with couple relationships, quick, reliable and valid questionnaires are needed to assess family relationships. To assess these, Miller et al. (2022) did some additional research on an existing questionnaire and established a reliable change index and a clinical cut-off score for The Systemic Clinical Outcome and Routine Evaluation version 15 (SCORE-15). The SCORE-15 was created by Stratton and colleagues (2010) to better track familial progress throughout therapy. While the SCORE-15 has three subscales, this research used the SCORE-15 as a one-dimensional scale of family functioning. Using SCORE-15 allows clinicians to track treatment progress, providing the opportunity to better individualize treatment for each family.

Finally, due to the importance of the therapy alliance to client outcomes, it was necessary to develop a short questionnaire to assess the alliance. Thus, the individual, couple, and family Intersession Alliance Measures (IAM) were created to better assess the therapeutic alliance across time (Anderson et al., 2024). Psychometric properties of the three versions were examined and all items loaded on one factor, had good internal consistency, test-retest reliability, concurrent validity, and demonstrated measurement invariance across sex. Further, the couple and family versions had good predictive validity for therapy outcomes. Consistently using the IAM allows clinicians to be more aware of how clients view the alliance between the therapist and client, and between each other, in relational cases. Doing so can help therapists better identify when a rupture has occurred and be intentional about fixing the respective rupture. Further, the length of this questionnaire (4 items) makes it ideal for use across time.

Therapeutic Alliance

The relationship between therapist and client has been associated with client outcomes in therapy (Friedlander et al., 2011), and the results from MFT-PRN research build on previous research to allow additional understanding. Maintaining a therapeutic alliance in relational cases is more complex than in individual cases because the alliance must be created and sustained between the therapist and multiple people simultaneously. Due to this complexity, the therapeutic alliance in couple cases not only influences individual outcomes, but couple outcomes as well.

Articles using MFT-PRN data on the alliance showed how couples' expectations of the therapy predict the therapeutic alliance (Orlowski et al., 2024), and how initial role and outcome expectations are related to the therapeutic alliance and couple relationship satisfaction (Orlowski et al., 2024). Additional results indicate that higher positive expectations in individual partners were predictive of better therapeutic alliances reported before the fourth therapy session (Orlowski et al., 2023; Orlowski et al., 2024), and that better therapeutic alliances reported at the third session were predictive of higher couple satisfaction at session four (Orlowski et al., 2024).

Further findings show that the therapeutic alliance was a moderator between depressive symptoms and couple relationship satisfaction, finding that when the therapeutic alliance was poor, higher depressive and lower couple relationship scores at intake were predictive of more adverse symptoms in both individuals and couples, in comparison to couples who reported fewer symptoms at intake (Wu et al., 2020a). Similarly, Wu et al. (2020b), found the occurrence of four couple groups, namely couples who both reported higher symptoms, female higher, male higher, and both lower. Among these groups, males and females in the “both higher” group indicated higher initial therapeutic alliance levels, while men in “male higher” and “female higher” also reported a higher initial therapy alliance. Finally, results show that if a disagreement existed between couples about whether the presenting problem was individual or relational, there was a greater discrepancy in the couple’s initial therapeutic alliance, which lessened over time as the therapy continued (Wu et al., 2020b).

Therapy Outcome

A growing number of studies exist that look at couple process and therapy outcomes. Xu and colleagues (2022) showed that difficulty in aspects of emotion regulation, such as a lack of emotional awareness, difficulty with impulse control, and limited emotion regulation strategies, were predictive of lower couple relationship satisfaction, and nonacceptance of negative emotions increased couple relationship satisfaction. Since nearly all couples experience emotion dysregulation, which was found to influence couple relationship satisfaction, clinicians must monitor emotion regulation among the couples they are seeing.

Additional research showed that client-rated participation and goal-progress predicted the clients’ personal functioning while therapist-rated session variables did not (Wu et al., 2023). As therapist perceptions of therapy sessions did not consistently predict client outcomes, clinicians must monitor client progress through consistent client feedback. Therapists can then use the feedback to guide and amend their treatment plan to better client care and outcomes. The authors suggested that for clinicians-in-training, comparing therapist perception and client feedback could be particularly useful in helping new therapists develop better clinical judgment and treatment plans (Wu et al., 2021).

Finally, research has shown that adverse childhood experiences (ACEs) impacted the rate of improvement for anxiety symptoms across therapy sessions (Banford Witting et al., 2024). The authors found that the number of ACEs reported did not significantly impact the rate of reduction in anxiety symptoms, but that people with more ACEs reported greater amounts of anxiety at the onset of therapy. If clinicians notice that clients present to therapy with high levels of anxiety, they should assess the number of ACEs the client has experienced. Similarly, clinicians should monitor client anxiety if they report higher levels of ACEs. Encouragingly, therapy was found to be equally advantageous for clients with both many or few ACEs.

Teletherapy

In response to the COVID-19 pandemic, teletherapy has become a more popular option for service delivery. Therefore, research is needed to best understand how to use this service delivery option. MFT-PRN research has explored how teletherapy impacted therapeutic outcomes. First, teletherapy services are just as effective as in-person therapy in enhancing client outcomes (Bradford et al., 2023). However, the therapeutic alliance did not develop as quickly through teletherapy, with in-person alliances developing twice as fast. Further, research found that couples who received therapy via telehealth reported higher couple satisfaction at intake than couples attending therapy in person, although their rate of improvement was slower (Bradford et al., 2024). The therapeutic alliance was then added as a mediator, revealing that couples in teletherapy reported higher therapeutic alliance scores than their in-person counterparts, although the rate of improvement in the alliance was slower in men who were receiving teletherapy.

This has several clinical implications. First, if clients are not able to come in person, therapists can offer teletherapy that is as effective as in-person therapy. However, clinicians should spend extra time establishing a strong therapeutic alliance since the alliance mediates therapy modality and couple satisfaction and takes twice as long to develop via teletherapy (Bradford et al., 2023; Bradford et al., 2024). Second, due to the added time and complexity of developing the alliance, and its impact on other therapy outcomes during teletherapy, treatment may take longer and require more intentionality and focus.

Conclusion

The Marriage and Family Therapy Practice Research Network (MFT-PRN) is a way systemic researchers and clinicians can collaborate to improve client outcomes. Benefits of the MFT-PRN include access to routine assessments, large and diverse sample sizes, monitored outcomes, contribution to the increase of evidence-based practice and practice-based research, and intentional and ethical practice. To date, collaboration has been successful in improving client outcomes with many clinics using the MFT-PRN. Research collaborations have also demonstrated results that can further improve client outcomes. Results include information about the therapeutic alliance, therapy process and outcomes, couple relationship satisfaction, teletherapy, and advances in measurement.

To date, we have collected data on over 14,000 clients. We are also in the process of making additional refinements to the MFT-PRN, such as the previously mentioned screening questionnaire, and transitioning to a more user-friendly interface. We are also working to add additional partners. While recruiting current collaborators, we have had the wonderful opportunity to meet and learn from therapists and clinic directors from around the world. It has been amazing to see what people are doing to help couples and families. Adding more partners will only increase the value of what can be learned via the MFT-PRN. We hope that continuing data collection and exploring the collected data will help further the field of Marriage and Family Therapy and bring clinicians and researchers together to better treat mental health problems and relationships.

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Declaration of interest statement

The authors have no conflicts of interest to disclose.

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References

Anderson, S. R., Johnson, L. N., Miller, R. B., & Barham, C. C. (2021). The couple relationship scale: A brief measure to facilitate outcome monitoring in couple therapy. *Journal of Marital and Family Therapy*, 48(2). <https://doi.org/10.1111/jmft.12541>

Anderson, S. R., Johnson, L. N., Banford Witting, A., Miller, R. B., Bradford, A. B., Hunt, Q. A., & Bean, R. A. (2024). Validation of the intersession alliance measure: Individual, couple, and family versions. *Journal of Marital and Family Therapy*, 50(3). <https://doi.org/10.1111/jmft.12702>

Anker, M. G., Duncan, B. L., & Sparks, J. A. (2009). Using client feedback to improve couple therapy outcomes: A randomized clinical trial in a naturalistic setting. *Journal of Consulting and Clinical Psychology*, 77(4), 693–704. <https://doi.org/10.1037/a0016062>

Banford Witting, A. B., Anderson, S. R., Johnson, L. N., Barrow, B. H., & Peery, A. (2024). The trajectory of anxiety in therapy: The role of ACEs. *Journal of Marital and Family Therapy*, 50(3), 744–758. <https://doi.org/10.1111/jmft.12703>

Bickman, L., Kelley, S. D., Breda, C., de Andrade, A. R., & Riemer, M. (2011). Effects of routine feedback to clinicians on mental health outcomes of youths: Results of a randomized trial. *Psychiatric Services, 62*(12), 1423–1429. <https://doi.org/10.1176/appi.ps.002052011>

Bradford, A. B., Johnson, L. N., Anderson, S. R., Banford-Witting, A., Hunt, Q. A., Miller, R. B., & Bean, R. A. (2023). Call me maybe? In-person vs teletherapy outcomes among married couples. *Psychotherapy Research, 34*(5). <https://doi.org/10.1080/10503307.2023.2256465>

Bradford, A. B., Banford-Witting, A., Anderson, S. R., Johnson, L. N., Hunt, Q. A., Miller, R. B., & Bean, R. A. (2024). Lost in translation: Therapeutic alliance as a mediator in the relationship between teletherapy and marital satisfaction. *Family Process, 63*(4). <https://doi.org/10.1111/famp.13004>

Coombs, N. C., Meriwether, W. E., Caringi, J., & Newcomer, S. R. (2021). Barriers to healthcare access among U.S. adults with mental health challenges: A population-based study. *SSM - Population Health, 15*, Article 100847. <https://doi.org/10.1016/j.ssmph.2021.100847>

Duszynski-Goodman, L. (2024). *Mental health statistics and facts*. Forbes.

el-Guebaly, N., & Atkinson, M. J. (2004). The practice research network: Benefits and limitations. *World Psychiatry, 3*(1), 56–59.

Friedlander, M. L., Escudero, V., Heatherington, L. & Diamond, G. M. (2011). Alliance in couple and family therapy. *Psychotherapy, 48*(1), 25–33. <https://doi.org/10.1037/a0022060>

Halford, W. K., Hayes, S., Christensen, A., Lambert, M., Baucom, D. H., & Atkins, D. C. (2012). Toward making progress feedback an effective common factor in couple therapy. *Behavior Therapy, 43*(1), 49–60. <https://doi.org/10.1016/j.beth.2011.03.005>

Howard, K. I., Moras, K., Brill, P. L., Martinovich, Z., & Lutz, W. (1996). Evaluation of psychotherapy: Efficacy, effectiveness, and patient progress. *American Psychologist, 51*(10), 1059–1064. <https://doi.org/10.1037/0003-066X.51.10.1059>

Johnson, L. N., Miller, R. B., Bradford, A. B., & Anderson, S. R. (2017). The Marriage and Family Therapy Practice Research Network (MFT-PRN): Creating a more perfect union between practice and research. *Journal of Marital and Family Therapy, 43*(4), 561–572. <https://doi.org/10.1111/jmft.12238>

Krug, E. G., Mercy, J. A., Dahlberg, L. L., & Zwi, A. B. (2002). The World Report on violence and health. *The Lancet, 360*(9339), 1083–1088. [https://doi.org/10.1016/s0140-6736\(02\)11133-0](https://doi.org/10.1016/s0140-6736(02)11133-0)

Laurenceau, J.-P., Hayes, A. M., & Feldman, G. C. (2007). Some methodological and statistical issues in the study of change processes in psychotherapy. *Clinical Psychology Review, 27*(6), 682–695. <https://doi.org/10.1016/j.cpr.2007.01.007>

Lopes, L., Kirzinger, A., Sparks, G., Stokes, M., & Brodie, M. (2022, October 5). *KFF/CNN Mental Health in America survey*. KFF. <https://www.kff.org/report-section/kff-cnn-mental-health-in-america-survey-findings/>

Miller, R. B., Nebeker, A. C. A., Anderson, S. R., Bradford, A. B., & Johnson, L. N. (2022). The development of a reliable change index and cutoff score for the SCORE-15. *Journal of Marital and Family Therapy, 49*(1), 36–48. <https://doi.org/10.1111/jmft.12600>

Orlowski, E. W., Friedlander, M. L., Anderson, S. R., & Johnson, L. N. (2023). To what extent are early alliance perceptions a function of romantic partners' initial expectations for couple therapy? *Journal of Family Therapy, 46*(1), 59–69. <https://doi.org/10.1111/1467-6427.12446>

Orlowski, E. W., Friedlander, M. L., Johnson, L. N., & Anderson, S. R. (2024). Heterosexual couples' initial role and outcome expectations as predictors of the therapeutic alliance and relationship satisfaction prior to the fourth session. *Journal of Counseling Psychology, 71*(4), 268–277. <https://doi.org/10.1037/cou0000720>

Ortiz-Ospina, E., & Roser, M. (2020, July). *Marriages and divorces*. Our World in Data. <https://ourworldindata.org/marriages-and-divorces>

Pinsof, W. M., & Wynne, L. C. (2000). Toward progress research: Closing the gap between family therapy practice and research. *Journal of Marital and Family Therapy, 26*(1), 1–8. <https://doi.org/10.1111/j.1752-0606.2000.tb00270.x>

Pinsof, W. M., Zinbarg, R. E., Lebow, J. L., Knobloch-Fedders, L. M., Durbin, E., Chambers, A., Latta, T., Karam, E., Goldsmith J. & Friedman, G. (2009). Laying the foundation for progress research in family, couple, and individual therapy: The development and psychometric features of the initial systemic therapy inventory of change. *Psychotherapy Research, 19*(2), 143–156. <https://doi.org/10.1080/10503300802669973>

Reese, R. J., Toland, M. D., Slone, N. C., & Norsworthy, L. A. (2010). Effect of client feedback on couple psychotherapy outcomes. *Psychotherapy: Theory, Research, Practice, Training, 47*(4), 616–630. <https://doi.org/10.1037/a0021182>

Shimokawa, K., Lambert, M. J., & Smart, D. W. (2010). Enhancing treatment outcome of patients at risk of treatment failure: Meta-analytic and mega-analytic review of a psychotherapy quality assurance system. *Journal of Consulting and Clinical Psychology, 78*(3), 298–311. <https://doi.org/10.1037/a0019247>

Simon, J., Boyer, P., Caldas-de-Almeida, J. M., Knapp, M., McCrone, P., Gorwood, P., Oertel, W., Arango, C., Treasure, J., Young, A. H., Destrebecq, F., & Quoidbach, V. (2023). Viewpoint: Assessing the value of mental health treatments in Europe. *European Psychiatry, 66*(1), e59. <https://doi.org/10.1192/j.eurpsy.2023.2419>

Statista Research Department. (2024). *Mental health in Europe - Statistics and facts*. Statista. <https://www.statista.com/topics/7916/mental-health-in-europe/#topicOverview>

Stratton, P., Bland, J., Janes, E., & Lask, J. (2010). Developing an indicator of family function and a practicable outcome measure for systemic family and couple therapy: The SCORE. *Journal of Family Therapy, 32*(3), 232–258. <https://doi.org/10.1111/j.1467-6427.2010.00507.x>

Terlizzi, E. P., & Schiller, J. S. (2022). *Mental health treatment among adults aged 18–44: United States, 2019–2021* (NCHS Data Briefs Series). National Center for Health Statistics. <https://doi.org/10.15620/cdc:120293>

United Nations Women. (2023). *Facts and figures: Ending violence against women*. <https://www.unwomen.org/en/what-we-do/ending-violence-against-women/facts-and-figures>

Vankar, P. (2024). *Mental health treatment or therapy among U.S. adults 2022*. Statista.
<https://www.statista.com/statistics/794027/mental-health-treatment-counseling-past-year-us-adults/>

Vitry, G., Duriez, N., Lartilleux-Suberville, S., Pakrosnis, R., Beau, A., Garcia-Rivera, T., Brosseau, O., Vargas Avalos, P., Bardot, E., & Ray, W. A. (2020). Introducing SYPRENE: An international practice research network for strategic and systemic therapists and researchers. *Family Process*, 59(4), 1946–1957.
<https://doi.org/10.1111/famp.12520>

Wainberg, M. L., Scorza, P., Shultz, J. M., Helpman, L., Mootz, J. J., Johnson, K. A., Neria, Y., Bradford, J. E., Oquendo, M. A., & Arbuckle, M. R. (2017). Challenges and opportunities in global mental health: A research-to-practice perspective. *Current Psychiatry Reports*, 19(5), Article 28.
<https://doi.org/10.1007/s11920-017-0780-z>

Wang, W. (2020, November 10). The U.S. divorce rate has hit a 50-year low. *Institute for Family Studies*.
<https://ifstudies.org/blog/the-us-divorce-rate-has-hit-a-50-year-low>

World Health Organization. (2022). *Mental disorders*.
<https://www.who.int/news-room/fact-sheets/detail/mental-disorders>

Wu, Q., McWey, L. M., & Ledermann, T. (2020a). Clients' attributions of the presenting problem and the therapeutic alliance in couple therapy: Systemic versus intrapersonal perspectives. *Journal of Marital and Family Therapy*, 46(4), 661–673.
<https://doi.org/10.1111/jmft.12432>

Wu, Q., McWey, L. M., & Ledermann, T. (2023). Which therapist perceptions best predict client outcomes? A naturalistic examination. *Journal of Marital and Family Therapy*, 49(1), 151–158.
<https://doi.org/10.1111/jmft.12611>

Wu, Q., Parker, M. L., McWey, L. M., & Ledermann, T. (2020b). Couple satisfaction, depressive symptoms, and the therapeutic alliance: A systemic perspective. *Family Process*, 60(2), 393–408.
<https://doi.org/10.1111/famp.12594>

Wu, Q., Su, T., McWey, L. M., & Ledermann, T. (2021). Individual's pretreatment psychological symptoms and progress in couples therapy: A person-centered analysis. *Family Process*, 61(2), 591–608.
<https://doi.org/10.1111/famp.12713>

Xu, M., Johnson, L. N., Anderson, S. R., Hunt, Q., Bradford, A. B., Banford Witting, A., Bean, R., & Miller, R. B. (2022). Emotion dysregulation and couple relationship satisfaction of clinical couples: An actor-partner interdependence model. *Family Process*, 62(4), 1555–1573.
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PERSPECTIVE ARTICLE

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Artificial Intelligence (AI) in the Family System: Possible Positive and Detrimental Effects on Parenting, Communication and Family Dynamics

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Introduction: This perspective article reflects on how innovative technologies, including artificial intelligence (AI) systems like smart voice agents and chatbots, may transform family dynamics and communication. Despite the extensive research on AI's impact in mental healthcare and education, its influence on family systems remains underexplored. This perspective article aims to draw attention to the possible positive and detrimental effects of using AI in families, highlighting the necessity of fostering AI literacy in this setting.

Areas covered: The article delves into integrating AI within family therapy models, focusing on how AI redefines family boundaries, roles, communication, rituals, and narrative creation. It explores AI's potential to enhance parent training programs and its impact on children's social and cognitive development.

Expert opinion: AI presents both opportunities and challenges for family systems. It can enhance communication, support role negotiation, and promote family cohesion, but it also raises ethical and privacy concerns. The balance between utilizing AI to support family values and avoiding the detrimental effects of over-reliance is crucial.

Conclusion: Integrating AI into family systems offers significant potential benefits, but it must be managed carefully to ensure it aligns with family values and strengthens family bonds. Fostering AI literacy within families is essential to navigate the complexities and harness the advantages of AI technologies.

Keywords: AI literacy, artificial intelligence, family communication, family dynamics, parenting

Introduction

In the present paper, artificial intelligence (AI) is referred to as intelligent systems based on enormously large datasets that are capable of analyzing their surroundings in order to fulfil specific tasks. These systems may appear in families' life in various forms, such as personalized online content recommendations (e.g., Netflix, YouTube) online purchase recommendations (e.g., Amazon) as well as smart assistants such as OpenAI's ChatGPT, Apple's Siri, Amazon's Alexa (Helm et al., 2020).

Besides having a strong academic interest in the possible psychological impact of AI, the authors of this paper approach the topic from different perspectives. The first author, both as a researcher and as a clinical psychologist and family therapist, strives to answer how modern technological solutions affect mental health and how they might aid in the healing process. Among the first author's professional areas of expertise, third-wave cognitive therapies and family therapy are particularly noteworthy. The second author is a psychologist working with Acceptance and Commitment Therapy (ACT) and an artificial intelligence application specialist, and her main area of scientific interest is application possibilities of AI in psychotherapy, as well as the scientific investigation of its possible effects on human relationships. The second author works on empirical studies focusing on AI such as investigating health professionals' attitudes of artificial intelligence, as well as studies reviewing existing literature on the application of AI in psychological treatment, diagnosis and prevention.

Conceptual Framework of the Problem

The term "family system" refers to a conceptual framework that views a family as an interconnected and interdependent group of individuals whose interactions shape each person's behaviors, beliefs, communication and health. Within a family system, each member has a specific role and changes in one part of the system can affect the whole family dynamic.

The family therapy models (e.g., Structural Family Therapy (Minuchin, 1974), Strategic Family Therapy (Haley, 1991), Solution-Focused Brief Therapy (De Shazer & Berg, 1997), and Narrative Family Therapy (Madigan, 2012) emphasize the importance of boundaries, roles, communication patterns, narrative and meaning-making in maintaining family functionality and well-being.

Technology – as we will discuss – can also modify parenting. Parenting is the multifaceted process of guiding and nurturing a child through every stage of their physical, emotional, social, and cognitive development. It involves more than just meeting basic needs, it also includes providing emotional support, setting boundaries and teaching values. Effective parenting fosters resilience, empathy, and independence (Smith, 2010).

Current technological advancements, such as generative AI and virtual agents have a broad impact on various aspects of people's lives, including the family sphere. Generative AI refers to a branch of artificial intelligence focused on creating new content – text, images, music or other forms – by identifying and reproducing patterns found in existing data sets (Feuerriegel et al., 2024). These models use deep learning techniques to generate outputs that appear novel and human-like. Virtual agents ("chatbots") interact through natural language, interpret requests, and perform tasks like retrieving information or controlling devices. Using machine learning, they continually refine their responses.

Digitalization and automatization have introduced new approaches to self-representation and social identities (Moga & Ruginis, 2023), the education for young children (Yang, 2022), and communication between family members (Mavrina, 2022). AI-powered smart devices might affect communication breakdown between family members (Beneteau et al., 2019), children's development (Alrusai & Beyari, 2022) as well as raising privacy concerns.

"Technophobia" and "techno-optimism" manifest prominently in the context of artificial intelligence. Technophobia is driven by fears of job displacement, ethical concerns, and potential loss of human control over autonomous systems (Khasahwneh, 2018). Conversely, techno-optimism is a belief that technological developments (in our case AI) will solve complex challenges in the field of healthcare, economics, and inequity (Königs, 2022).

Aims

There is research about the impact of AI in social contexts, such as in mental healthcare (Minerva & Giublini, 2023) or education (Chen et al., 2020); however, less attention falls on how it affects family systems. Thus, our perspective article aims to reflect on how AI-based technological advancements may impact family dynamics. In this article, the authors explore the potential benefits and pitfalls of AI systems concerning the dynamics and communication in the family system, highlighting research opportunities. We also try to find a balance between fears and optimism in this perspective article, expressing the strong need for fostering AI literacy within families.

To write this article, the authors used the literature review method. This allowed authors to integrate diverse theoretical and empirical sources, along with practical experiences and reflections. We gathered and examined literature (peer-reviewed journal articles, conference proceedings, and relevant books) from psychology and technology focusing on how AI influences family dynamics and communication patterns. We also included observations shared by clinicians and researchers to illustrate practical implications.

We hypothesize that applying artificial intelligence technologies in families is useful when it serves the fulfillment of family values and supports family connections. When its usage does not align with the values or when it weakens family bonds (e.g., with the “outsourcing” of parental duties), then this could become detrimental.

The Concept of Main Family Therapy Systems and AI

Developing AI could affect family boundaries, roles, rituals and communication in the family as well as the challenges of parenting. In the following subsections, we discuss the potential impact of AI on family boundaries, roles and rituals.

Family Boundaries and AI

Family boundaries are the invisible lines that define individual family members' roles and responsibilities, distinguishing between subsystems within the family, e.g., parental, sibling (Scabini & Manzi, 2011).

The presence of AI in the family can reshape these boundaries. Moreover, it raises significant ethical and privacy concerns, since automated agents, like smart home assistants or AI-based security systems, can witness private activities in families, which may include sensitive matters such as sex or abuse (McStay, 2020). When an AI-based security system detects illegal acts, such as domestic abuse, questions about data usage arise. AI's ability to automatically notify authorities has the potential to reduce domestic violence incidents that have so far remained hidden. Although the evidence that has been gathered by AI might be crucial in prosecuting offenders, child protection services must be prepared for a potential significant increase in reports. Ethical guidelines and official regulations must be established on whether and how the information might be used to protect individuals while respecting privacy (Wylde et al., 2023).

Besides, the presence of AI in the family raises questions about the flow of information among subgroups of the family: should the AI inform the parents about the child's maladaptive behavior (e.g., drug use)? Or if the AI is “aware” of the infidelity of one spouse, should it inform the other partner?

Another question connected to boundaries is the “socialification” of the family as an effect of AI (Hiroshi, 2018). It is likely that, in the near future, a growing number of people will seek for intimate relationships with artificial agents (embodied as social robots or in other forms). This trend is referred to as “socialification” of familyship; that is, a phenomenon in which the virtual humans, as products or services offered by businesses, become partners/family members, and a change in which some parts of the intimate relationships within families are shared in society (Yamaguchi, 2020). Just as the socialification of nursing care reduced the burden of care on Japanese women and improved their quality of life (QoL) (Hiroshi, 2018), adopting virtual humans as a socialification of familyship is also likely to improve the QoL of people with difficulties worldwide.

Roles in the Family and the AI

Family therapy models emphasize the importance of well-defined roles for the healthy functioning of the family unit. AI can support the redefinition and reinforcement of these roles. For example, AI-based therapy apps can offer personalized guidance to parents and children, helping them understand and fulfil their roles more effectively. These apps can provide real-time feedback, reminders, and educational content, facilitating better role performance (e.g., Alkadhil, 2024). Additionally, AI can assist in “role negotiation” by analyzing family interactions and suggesting adjustments to roles that align with each member's strengths and needs. This process is a frequent step in family therapy, which can be performed outside the context of therapy (Grosjean et al., 2024). Nonetheless, the potential risk of AI suggesting family roles rather than merely supporting them must be considered, as it may lead to a reduction in organic role evolution and personal agency.

The Effect of AI on the Communication Within the Family

Effective communication is a cornerstone of healthy family dynamics. AI has the potential to enhance communication within the family system through various means. Natural language processing (NLP) algorithms can be employed to analyze communication patterns and identify issues such as miscommunication or conflict triggers. AI-driven platforms can offer communication training, conflict resolution strategies, and even real-time mediation during disputes (Pereira, 2020). For example, AI can search the pattern of active-constructive communication (Roelle et al., 2015) and can support this type of response. AI can support non-verbal communication enhancements through tools that analyze body language and emotional expressions (Pereira, 2020), offering insights and feedback to family members on improving their interpersonal interactions. Of course, relying on AI for communication support must be balanced with the need for genuine human connection and empathy, which are essential components of effective communication.

Family Rituals and the AI

Family rituals are defined as a symbolic form of communication and patterned family interactions (Wolin & Bennett, 1984). Rituals contribute to the family's collective sense of itself (also known as the family identity, Wolin & Bennett, 1984). AI may promote family cohesion by suggesting and organizing family rituals and activities that foster unity. By analyzing family schedules and preferences, AI may recommend shared activities, holidays, and traditions that strengthen family bonds. Following the family's "life cycle", AI may suggest new rituals or traditions based on the family's interests and values, helping to create meaningful practices – for keeping them fresh and engaging (Johannessen, 2023).

Could AI help the Narrative and Meaning-Making Process in the Families?

Narrative therapy emphasizes the stories and meanings families create about their lives and relationships. AI can support this process by helping families identify and articulate their narratives (Megala et al., 2024). For narrative creation, AI can use information about the ancestors (stories or narratives based on family history), integrating names, places, and events unique to the family. In this way, the narrative-creation might become a more social, more deep and more engaging process (Wilson et al., 2025).

Parental Training and Technology

AI and NLP could transform the provision of parenting support, skill development, and in turn, lead to behaviour change (Petsolari et al., 2024). Although parental training is widely recognised as an effective and evidence-based intervention for parents to become equipped with parental skills and techniques (Morris et al., 2020), it has some limitations. In-person parental training programs require engagement from parents (Dumas et al., 2007), which can be challenging. In addition to that, these programs face challenges when it comes to parental retention. Besides, a great number of parents – who actually make it to the sessions – report difficulties in implementing the learnt methods into practice (Mockford & Barlow, 2004). Moreover, the effectiveness of parental training programs depends on parents consistently applying the skills they have acquired in the appropriate settings and with the intended goals in mind (Petsolari et al., 2024). AI-based technologies may possess the ability to enhance the effectiveness of parental trainings in several ways. First, AI-based parental trainings are delivered through smart gadgets (instead of in-person), which might increase scalability and reach (Entenberg et al., 2021). It also allows parents to ask for immediate help in stressful family situations. In addition, this feature might contribute to helping bridge the gap between parents who would attend parental trainings and parents who actually enrolled into the trainings, since it increases the availability.

Intelligent technologies may offer support, advice and guidance for parents in various ways; however, these technologies may also lead to potential pitfalls. First, privacy concerns and security risks need to be addressed since these devices are vulnerable to hacking and other cybersecurity threats, resulting in sensitive information of the family becoming accessible or even being misused (Salah et al., 2024). Second, parental over-reliance of these technologies may result in misinformed decisions, since the responses generated by AI systems may not always be accurate; there is a chance of their information being biased (Shroff, 2022).

Augmented Parenting: Potential Positive and Detrimental Impacts on Children's Development

Certain AI systems, such as smart speakers like Amazon's Alexa, Google Assistant, and Apple's Siri can be considered as social actors and play a mediating role in constructing family relationships (Wang et al., 2023). Millions of households have adopted and integrated these "invisible" technologies, embedded in the background of their everyday lives (Garg & Sengupta, 2020). They might help families to manage their day-to-day activities by setting reminders, playing music, providing weather updates, and answering questions. These technological systems hold the capability to carry out tasks instead of family members (Beneteau et al., 2020). They might help with traditionally parental tasks such as reading bedtime stories or assisting school-age children with homework. According to Beneteau et al. (2020) this type of smart speaker use behaviour is called *augmented parenting*.

When an AI-based technology may become present in a child's life to such a significant extent that it takes over the role of a parent, questions arise about its impact on the child's psychological and cognitive development. The excessive use of smart agents may impact children's social and cognitive development. Overuse of smart agents potentially leads to reduced interpersonal interactions between parents and their children. Since personal interactions between parents and their children are essential for the children's development of social skills, problem-solving skills, cognition and empathy (Lanjekar et al., 2022), excessive use of smart agents might have disadvantageous effects. As Garg and Sengupta (2020) identified, children primarily use these devices to engage in conversations through small talk and to express emotions, and they attribute a human-like identity to devices, trying to understand them as people. Young children (5–7 years old) tend to develop emotional attachment to these devices (Garg & Sengupta, 2020). Since smart agents offer quick and simple answers, children who frequently use them might have reduced opportunities to develop critical thinking (Zhai et al., 2024) and they might also have a shorter attention span. Over-reliance on smart agents might impact children's language skills as well. Even though smart agents may assist in language learning and are capable of NLP (Huang et al., 2022), using them excessively may limit children's exposure to nuanced and rich human language interaction, affecting their vocabulary and comprehensive skills. Similarly, conversational skills development requires meaningful two-way conversations. Since parent-infant interaction is a key factor in language development (Topping et al., 2018), children who interact with smart agents more than with humans, might not develop strong conversational skills. While AI-based technologies may offer various benefits for families, it is essential to ensure that technologies complement, rather than replace, parent-child interaction in order to support children's well-rounded development.

In addition, a growing body of work has explored how tracking children has implications within the broader family ecosystem (Lupton, 2021; Wang et al., 2017). Previous studies identified positive effects of implementing personal informatics tools to track children's data. They highlighted that it not only improves parents' understanding of their child's patterns but also reduces the need for frequent physical check-ups by facilitating the transfer of baby-related information, such as sleep patterns, movements, signs of distress, heart rate or breathing, to mobile applications (Lupton, 2020). Conversely, Wang et al. (2017) also identified that using baby monitoring or child habits monitoring may have detrimental effects on parents' mental health as it can increase their anxiety. Moreover, we suggest that reverse causality can be present, too, meaning that increased anxiety might result in more child monitoring. Balancing the downsides and benefits of technology use, while also practicing traditional parenting methods, is crucial for the child's development as well as the parents' mental well-being.

Conclusion

In this perspective article, the authors drew attention to the possible beneficial and detrimental effect of integrating AI into family systems. AI may enhance communication between family members, support role negotiation, and promote family cohesion. However, it also raises ethical and privacy concerns. In addition, it must be managed carefully to ensure it aligns with family values and strengthens family bonds. The rapid advancement of AI has made the development of AI literacy inevitable (Pinski & Benlian, 2024), that is, to increase human proficiency in different subject areas of AI that enable the purposeful, efficient, and ethical usage of AI technologies.

As Anggriani et al. (2024) point out, an AI literacy gap might exist between generations in the family. Parents may need to learn new digital skills to help their children with their education. They must also model positive adaptation, demonstrating openness to learning and change (Ahmed, 2020). Ideally, in a parent-child partnership process, AI literacy is increasing (Drugat et al., 2022). By considering these potential impacts, families can navigate

the integration of AI in ways that enhance communication and strengthen their relationships while being mindful of the possible downsides.

Looking ahead, the complex relationship between AI and family dynamics highlights several questions for further research. Longitudinal studies are needed to explore how ongoing exposure to AI influences developmental milestones in children and whether optimal “dosages” or use patterns exist that support rather than hinder growth. Qualitative and mixed-method research could offer insights into how families renegotiate roles, boundaries and communication patterns when living with AI-driven agents. Such studies may shed light on the potential of AI to enhance or undermine family well-being.

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Author contribution

Máté Bene SZONDY: conceptualization, design, investigation, interpretation, writing original draft, writing review and editing.

Ágnes MAGYARY: conceptualization, design, investigation, interpretation, writing original draft, writing review and editing.

Declaration of interest statement

The authors have no conflicts of interest to disclose.

Declaration on using artificial intelligence in research and manuscript preparation

The authors declare that all AI-assisted processes were controlled and checked by the authors themselves.

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References

Ahmed, H. O. K. (2020). A suggested strategic roadmap for public Egyptian universities to adopt and adapt to the requirements of the fourth industrial revolution and society 5.0 to prepare students for the future labor market. *Journal of Education and Practice*, 11(29), 17–38.
<https://doi.org/10.7176/JEP/11-29-03>

Aldakhil, A. F. (2024). Investigating the impact of an AI-based play activities intervention on the quality of life of school-aged children with ADHD. *Research in Developmental Disabilities*, 154, Article 104858.
<https://doi.org/10.1016/j.ridd.2024.104858>

Alruseaini, O., & Beyari, H. (2022). The sustainable effect of artificial intelligence and parental control on children's behavior while using smart devices' apps: The case of Saudi Arabia. *Sustainability*, 14(15), Article 9388.
<https://doi.org/10.3390/su14159388>

Beneteau, E., Boone, A., Wu, Y., Kientz, J. A., Yip, J., & Hiniker, A. (2020). Parenting with Alexa: Exploring the introduction of smart speakers on family dynamics. In R. Bernhaupt, F. Mueller, D. Verweij, J. Andres (Eds.), *Proceedings of the 2020 CHI conference on human factors in computing systems (CHI '20)* (pp. 1–13). Association for Computing Machinery.
<https://doi.org/10.1145/3313831.3376344>

Beneteau, E., Richards, O. K., Zhang, M., Kientz, J. A., Yip, J., & Hiniker, A. (2019). Communication breakdowns between families and Alexa. In S. Brewster, G. Fitzpatrick, A. Cox, V. Kostakos (Eds.), *Proceedings of the 2019 CHI conference on human factors in computing systems (CHI '19)*. Article 243, pp. 1–13. Association for Computing Machinery.
<https://doi.org/10.1145/3290605.3300473>

Chen, L., Chen, P., & Lin, Z. (2020). Artificial intelligence in education: A review. *Ieee Access*, 8, 75264–75278.
<https://doi.org/10.1109/ACCESS.2020.2988510>

De Shazer, S., & Berg, I. K. (1997). ‘What works?’ Remarks on research aspects of solution-focused brief therapy. *Journal of Family Therapy*, 19(2), 121–124.
<https://doi.org/10.1111/1467-6427.00043>

Druga, S., Christoph, F. L., & Ko, A. J. (2022). Family as a third space for AI literacies: How do children and parents learn about AI together? In S. Barbosa, C. Lampe, A. Appert, D. A. Shamma, S. Drucker, J. Williamson, K. Yatani (Eds.), *Proceedings of the 2022 CHI Conference on human factors in computing systems (CHI '22)*. Article 225, pp. 1–17. Association for Computing Machinery.
<https://doi.org/10.1145/3491102.3502031>

Dumas, J. E., Nissley-Tsiopinidis, J., & Moreland, A. D. (2007). From intent to enrollment, attendance, and participation in preventive parenting groups. *Journal of Child and Family Studies*, 16, 1–26.
<https://doi.org/10.1007/s10826-006-9042-0>

Entenberg, G. A., Areas, M., Roussos, A. J., Maglio, A. L., Thrall, J., Escoredo, M., & Bunge, E. L. (2021). Using an artificial intelligence based chatbot to provide parent training: Results from a feasibility study. *Social Sciences*, 10(11), Article 426.
<https://doi.org/10.3390/socsci10110426>

Feuerriegel, S., Hartmann, J., Janiesch, C., & Zschech, P. (2024). Generative AI. *Business & Information Systems Engineering*, 66(1), 111–126.
<https://doi.org/10.2139/ssrn.4443189>

Garg, R., & Sengupta, S. (2020). He is just like me: A study of the long-term use of smart speakers by parents and children. *Proceedings of the ACM on Interactive, Mobile, Wearable and Ubiquitous Technologies*, 4(1), Article 11.
<https://doi.org/10.1145/3381002>

Grosjean, S., Fox, S., Cherba, M., & Matte, F. (2024). Editorial: Integrating digital health technologies in clinical practice and everyday life: Unfolding innovative communication practices. *Frontiers in Communication*, 9, Article 1426937.
<https://doi.org/10.3389/fcomm.2024.1426937>

Haley, J. (1991). *Problem-solving therapy, 2nd edition*. Jossey-Bass.

Helm, J. M., Swiergosz, A. M., Haeberle, H. S., Karnuta, J. M., Schaffer, J. L., Krebs, V. E., Spitzer, A. I., & Ramkumar, P. N. (2020). Machine learning and artificial intelligence: Definitions, applications, and future directions. *Current Reviews in Musculoskeletal Medicine*, 13, 69–76.
<https://doi.org/10.1007/s12178-020-09600-8>

Huang, W., Hew, K. F., & Fryer, L. K. (2022). Chatbots for language learning—Are they really useful? A systematic review of chatbot-supported language learning. *Journal of Computer Assisted Learning*, 38(1), 237–257.
<https://doi.org/10.1111/jcal.12610>

Johannessen, L. E. F. (2023). Interaction rituals and technology: A review essay. *Poetics*, 98, Article 101765.
<https://doi.org/10.1016/j.poetic.2023.101765>

Khasawneh, O. Y. (2018). Technophobia: Examining its hidden factors and defining it. *Technology in Society*, 54, 93–100.
<https://doi.org/10.1016/j.techsoc.2018.03.008>

Königs, P. (2022). What is techno-optimism? *Philosophy & Technology*, 35, Article 63.
<https://doi.org/10.1007/s13347-022-00555-x>

Lanjekar, P. D., Joshi, S. H., Lanjekar, P. D., & Wagh, V. (2022). The effect of parenting and the parent-child relationship on a child's cognitive development: A literature review. *Cureus*, 14(10), Article e30574.
<https://doi.org/10.7759/cureus.30574>

Lupton, D. (2020). Caring dataveillance: Women's use of apps to monitor pregnancy and children. In L. Green, D. Holloway, K. Stevenson, L. Hasson, & T. Leaver (Eds.), *The Routledge companion to digital media and children* (pp. 393–402). Routledge.

Lupton, D. (2021). Young people's use of digital health technologies in the Global North: Narrative review. *Journal of Medical Internet Research*, 23(1), Article e18286.
<https://doi.org/10.2196/18286>

Madigan, S. (2012). Narrative family therapy. In A. Rambo, C. West, A. Schooley, & T. V. Boyd (Eds.), *Family Therapy Review: Contrasting Contemporary Models*. Taylor & Francis.

Mavrina, L., Szczuka, J., Strathmann, C., Bohnenkamp, L. M., Krämer, N., & Kopp, S. (2022). "Alexa, you're really stupid": A longitudinal field study on communication breakdowns between family members and a voice assistant. *Frontiers in Computer Science*, 4, Article 791704.
<https://doi.org/10.3389/fcomp.2022.791704>

McStay, A. (2020). Emotional AI, soft biometrics and the surveillance of emotional life: An unusual consensus on privacy. *Big Data & Society*, 7(1).
<https://doi.org/10.1177/2053951720904386>

Megala, T., Premkumar, K., Chaarachithra, S. P., Sanjukta, T., Dhanushri, T. R. (2024). Survey on personalized story generator. *International Journal of Engineering Development and Research*, 12 (4), 111–115.
<https://rjwave.org/ijedr/papers/IJEDR2404012.pdf>

Minerva, F., & Giubilini, A. (2023). Is AI the future of mental healthcare? *Topoi*, 4, 809–817.
<https://doi.org/10.1007/s11245-023-09932-3>

Minuchin, S. (1974). *Families and family therapy*. Harvard University Press.

Mockford, C., & Barlow, J. (2004). Parenting programmes: Some unintended consequences. *Primary Health Care Research & Development*, 5(3), 219–227.
<https://doi.org/10.1191/1463423604pc200oa>

Moga, D. A., & Rughiniş, C. (2023). Idealized self-presentation through AI avatars: A case study of Lensa AI. In *2023 24th International Conference on Control Systems and Computer Science (CSCS), Bucharest, Romania*, (pp. 426–430). IEEE.
<https://doi.org/10.1109/CSCS59211.2023.00073>

Morris, A. S., Jespersen, J. E., Cosgrove, K. T., Ratliff, E. L., & Kerr, K. L. (2020). Parent education: What we know and moving forward for greatest impact. *Family Relations*, 69(3), 520–542.
<https://doi.org/10.1111/fare.12442>

Pereira, M. (2020). *Communication skills training intervention based on automated recognition of human emotion and non-verbal behaviour* [Doctoral dissertation, Brunel University London]. Brunel University Research Archive.

Petsolari, M., Ibrahim, S. B., & Slovak, P. (2024). Socio-technical imaginaries: Envisioning and understanding AI parenting supports through design fiction. In F. F. Mueller, P. Kyburz, J. R. Williamson, C. Sas, M. L. Wilson, P. Toups Dugas, I. Shklovski (Eds.), *Proceedings of the 2024 CHI Conference on Human Factors in Computing Systems*, Article 98, (pp. 1–27).
<https://doi.org/10.1145/3613904.3642619>

Pinski, M., & Benlian, A. (2024). AI literacy for users—A comprehensive review and future research directions of learning methods, components, and effects. *Computers in Human Behavior: Artificial Humans*, 2(1), Article 100062.
<https://doi.org/10.1016/j.chbah.2024.100062>

Roelle, J., Müller, C., Roelle, D., & Berthold, K. (2015). Learning from instructional explanations: Effects of prompts based on the active-constructive-interactive framework. *PLoS One*, 10(4), Article e0124115.
<https://doi.org/10.1371/journal.pone.0124115>

Salah, M., Abdelfattah, F., & Halbusi, H. A. (2024). The good, the bad, and the GPT: Reviewing the impact of generative artificial intelligence on psychology. *Current Opinion in Psychology*, 59, Article 101872.
<https://doi.org/10.1016/j.copsyc.2024.101872>

Scabini, E., & Manzi, C. (2011). Family processes and identity. In S. Schwartz, K. Luyckx, & V. Vignoles (Eds.), *Handbook of identity theory and research*. Springer.
https://doi.org/10.1007/978-1-4419-7988-9_23

Shroff, A. (2022, April 14.). *Healthcare AI bias: Reasons and resolutions*. Healthcare IT Today.
<https://www.healthcareittoday.com/2022/04/14/healthcare-ai-bias-reasons-and-resolutions/>

Smith, M. (2010). Good parenting: Making a difference. *Early Human Development*, 86(11), 689–693.
<https://doi.org/10.1016/j.earlhumdev.2010.08.011>

Topping, K. (2018). Enhancing parent-child language interaction in the pre-school years. In R. M. Gillies (Ed.), *Promoting academic talk in schools: Global practices and perspectives* (1st ed., pp. 112–127). Routledge.

Wang, B., Luo, L., & Wang, X. (2023). “Back to the living room era”: Smart speaker usage and family democracy from the family dynamic perspective. *New Media & Society*, 26(11), 6579–6596.
<https://doi.org/10.1177/14614448231155624>

Wang, J., O’Kane, A. A., Newhouse, N., Sethu-Jones, G. R., & de Barbaro, K. (2017). Quantified baby: Parenting and the use of a baby wearable in the wild. *Proceedings of the ACM on Human-Computer Interaction*, 1(CSCW), Article 108.
<https://doi.org/10.1145/3134743>

Wilson, C., Atabay, A., & Revans, J. (2025). Towards child-centred AI in children’s learning futures: Participatory design futuring with SmartSchool and the Co-Design Stories Toolkit. *International Journal of Human-Computer Studies*, 199, Article 103431.
<https://doi.org/10.1016/j.ijhcs.2024.103431>

Wolin, S. J., & Bennett, L. A. (1984). Family rituals. *Family process*, 23(3), 401–420.
<https://doi.org/10.1111/j.1545-5300.1984.00401.x>

Wylde, V., Prakash, E., Hewage, C., Platts, J. (2023). Ethical challenges in the use of digital technologies: AI and Big Data. In R. Montasari, V. Carpenter, & A. J. Masys (Eds.), *Digital transformation in policing: The promise, perils and solutions. Advanced Sciences and Technologies for Security Applications* (pp. 33–58). Springer.
https://doi.org/10.1007/978-3-031-09691-4_3

Yamaguchi, H. (2020). “Intimate relationship” with “virtual humans” and the “socialification” of familyship. *Paladyn, Journal of Behavioral Robotics*, 11(1), 357–369.
<https://doi.org/10.1515/pjbr-2020-0023>

Yang, W. (2022). Artificial Intelligence education for young children: Why, what, and how in curriculum design and implementation. *Computers and Education: Artificial Intelligence*, 3, Article 100061.
<https://doi.org/10.1016/j.caei.2022.100061>

Zhai, C., Wibowo, S., & Li, L. D. (2024). The effects of over-reliance on AI dialogue systems on students’ cognitive abilities: A systematic review. *Smart Learning Environments*, 11, Article 28.
<https://doi.org/10.1186/s40561-024-00316-7>