



Research Brief

Setting the Stage for Successful Integration of Relationship Education

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Family fragmentation, including divorce and unwed childbearing, is one of the leading causes of poverty in the United States, and, consequently, contributes to the destabilization of families.¹ Family fragmentation also increases taxpayers' costs since these families require additional economic support and/or safety-net services to regain or achieve self-sufficiency.² In fact, one study reports that the estimated cost of fragmented families to taxpayers is over \$112 billion each year.³ The negative effects of family instability are also seen in other areas, such as the outcomes of individual family members. For instance, research suggests that children from fragmented families have poorer overall well-being and more problem behaviors,⁴ and that long-term exposure to adversity, such as economic hardship, chronic neglect, and exposure to violence, can result in toxic stress—severe and lasting stress experienced without the presence of a supportive adult—which can damage the brain in ways that persist into adulthood.⁵

One way to combat the effects of family fragmentation is through relationship education skill-building activities or programs. These educational activities and programs are focused on principles and skills that help individuals, couples, and families increase the odds of having healthy, stable relationships with others.⁶ Most human service providers and administrators are interested in and capable of integrating relationship education into their existing services, yet perhaps aren't familiar with strategies to begin the process.⁷ Interestingly, relationship education is known to increase the

effectiveness of safety-net services for individuals and families. Further, agency administrators and service providers who have integrated relationship education into their existing services have found this to be a practical and well-received endeavor.

This brief will help service providers and administrators become familiar with the integration of relationship education into services. Providers will learn about the benefits of integration as well as what contributes to successful integration, including highlights from the field to demonstrate how others have integrated this information into various safety-net services. Providers will also learn strategies to start this process within their own agencies.



Integration of Relationship Education

Healthy marriage and relationship education (referred to as “relationship education”) consists of educational programs that help individuals, couples, and families increase the odds of having healthy, stable relationships and move closer to self-sufficiency.⁸ Relationship education has traditionally been offered to couples in a small group setting and features

skill-building activities.⁹ Unfortunately, many human services providers and administrators who provide safety-net services are unfamiliar with how core relational skills (communication, conflict resolution, parenting, and financial management) are developed through a healthy relationship/marriage, and with how relationship education can reduce barriers to self-sufficiency.¹⁰ Furthermore, agencies continue to operate without substantial interagency partnerships (i.e. families with multiple needs must visit multiple agencies), which limits access to certain relational supports for families with complex needs and places significant barriers on their path to self-sufficiency.¹¹



The National Resource Center for Healthy Marriage and Families (Resource Center) believes that relationship education can be integrated into existing services at any point along an agency's endeavor to serve individuals, couples, and families. The Resource Center's mission is to promote the integration of healthy marriage and relationship education into safety-net service systems as part of a holistic approach to strengthen families. Integration can take place in a variety of ways based on local strengths, needs, and capacity. Research has found a few specific elements that contribute to successful integration over time.

More than 270 individuals have attended the Resource Center's Integration Institutes. The Institutes are designed as a one day workshop that teaches state and regional human service

agency administrators and providers about the importance of relationship education and how to integrate it into existing safety-net services through a discussion of promising practices and lessons learned. Recognizing that not all individuals and agencies have qualities that contribute to successful integration, the Resource Center also provides highly personalized technical assistance periodically after an Institute. This assistance is designed to build the capacity of human service providers to integrate relationship education into their services. A number of Institute attendees have championed efforts to integrate relationship education into existing services in their agencies; a few of these efforts are highlighted throughout this brief as practical examples of what integration looks like in a variety of safety-net service arenas.

Benefits of integrating relationship education into an agency's services

Integrating relationship education into existing service delivery systems is a **cost-effective educational strategy that can improve the odds of achieving stable, healthy relationships among the clients an agency serves**.¹² There is no need to take drastic measures to ensure relationship education is incorporated into services. Rather, agencies can consider what they are currently offering and then think about ways that relationship education can be included. For some, this might be as simple as placing brochures in a waiting room and for others it may involve collaborating with partners from outside agencies for referrals—a great way to pool resources and expertise for the benefit of families.

Benefits of Integration

1. Cost-effective strategy
2. Combats family fragmentation
3. Efficient
4. Widespread impact and holistic change

**Chippewa Cree Tribal Temporary Assistance
for Needy Families (TANF) Program**

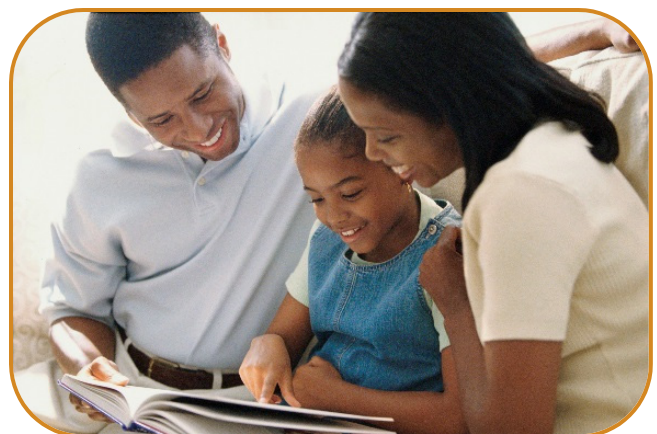
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After attending a Resource Center Integration Institute, this stakeholder began integrating relationship education into her tribal TANF program. Her staff enhanced a long-standing partnership with local schools by working with them to develop a program specifically designed to strengthen families by showing parents the importance of education as a means to moving out of poverty. The staff also developed a parenting skills program called Neiyahw Ojibewa Positive Parenting Program. They began offering this during home visits and in their Family Resource Center. The agency now uses the National Indian Child Welfare Association (NICWA) parenting program model to inform their practices. As another layer of integration, the agency partnered with a faculty member at Montana University Extension who is part of a Community Wellness Coalition that aims to spread information and resources to families participating in TANF. Through this partnership, they received funding for additional resources on family strengthening (healthy marriages, parent-child relations, self sufficiency) to share with clients.

Relationship education can be integrated into existing services as ***an effective strategy to combat family fragmentation***. Participants gain skills that help increase the odds of having healthy, stable relationships with others,¹³ which can help ensure that families stay together. For example, through healthy relationship education participants learn constructive conflict management skills so that negativity does not destabilize their relationships. They become able to calmly discuss things that frustrate them—and able to accept responsibility for their own shortcomings by not becoming defensive. Conflict management translates from family relationships into other environments, such as the workplace, which is why integration has resulted not only in reducing family fragmentation, but also in increasing the soft skills necessary to gain and maintain employment.¹⁴

The most efficient way to promote relationship education is by integrating it

into safety-net services, which ensures that service providers and policymakers reach the most people possible.¹⁵ Integrating relationship education into existing services gives individuals and families the opportunity to improve relationship skills through the service delivery systems that they are already accessing. This allows for growth and improvement within family or couple relationships and also gives parents the tools to model healthy relationship skills to their children. Healthy parenting and the presence of a caring parent can reduce or eliminate the incidence or impact of toxic stressors such as chronic neglect, exposure to violence, or family economic hardship and the possible long-term effects on individuals' physical and mental health—for example, heart disease, substance abuse, and depression.¹⁶ As a result of toxic stress, individuals may also have impaired executive function skills, which are skills such as impulse control that are crucial for many positive life outcomes like achieving productivity in the workforce.¹⁷ Further, essential life skills are learned through observing relationships within one's own family, a process easily disrupted by family dysfunction. Integration offers vulnerable families who are accessing services during transition or “change points” in their lives an opportunity to receive healthy relationship skill-building and hopefully prevent these negative outcomes.¹⁸



Child Find of America

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After attending an Integration Institute, this stakeholder shared resources, including those from the Resource Center and the National Responsible Fatherhood Clearinghouse, with his staff. These resources now provide the basis for brainstorming new ideas within his agency. He updated the conflict-resolution services of the Parent Help Program, a parenting program his agency employs. Making a departure from his agency's usual focus on crisis after an abduction, this parenting program has become the preventative arm of Child Find. As part of the Parent Help Program, Child Find has been offering conflict resolution services rooted in understanding the value of healthy relationships.

As an extension of his commitment to integration within his agency, he has pulled together partners and resources for a project to introduce healthy relationship skills into families at risk for child abduction. He is also working on a new project that encourages discussions about healthy relationships between parents and children, focusing on alternatives to corporal punishment and effective discipline strategies. He was also involved with a new healthy relationship program in New York that focused on domestic violence. This project involved working on their domestic violence protocol, and he supported the effort using relevant information from the Resource Center's website: <https://www.healthy marriageandfamilies.org/family-safety>.

Research shows that **service providers who employ a variety of methods to reach families through relationship education have a more widespread impact and encourage more holistic change in individuals' and families' lives.** Relationship education content, intensity, method, timing, setting, target, and delivery are all important factors to consider.¹⁹ A more widespread impact has been seen by service providers targeting individuals in nonconventional settings like correctional facilities or rehabilitation clinics, as well as with individuals who are receiving government assistance or who are unemployed.²⁰ It is worth noting that individual-centered services develop a more personal relationship, which can boost positive, long-term outcomes for couple, parent-child, and even employee-employer relationships.



Overview of elements that contribute to successful integration

Several elements strengthen the capacity of human service providers and administrators to integrate new practices and concepts, such as relationship education, into existing services. Research shows that readiness to change contributes to successful integration within an agency. Readiness to change is the ability to understand the importance of a situation and belief in one's ability to change or improve the situation.²¹ Other critical elements to successful integration include agency leadership, support from within an agency, and support from collaborative relationships outside an agency. These elements are also effective when integrating new practices into existing services.²²

Elements that Contribute to Successful Integration

- Readiness to change
- Agency leadership
- Support from within an agency
- Support from collaborative relationships outside an agency

Research has found that personal readiness to change (i.e., personal initiative to communicate new ideas and to get others on board with those ideas) predicts greater understanding of integration and greater personal competency to integrate healthy relationship education.²³ Essentially, participants who show up ready to

apply what they learn tend to gain greater knowledge and feel more equipped to integrate relationship education into their services. This, in turn, influences their ability to integrate once returning back to their agency. Those who reported greater confidence in their ability to integrate relationship education following the training experienced an increase in integration activities once returning to their agency.²⁴

Ohio Department of Rehabilitation and Correction

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After several members of the Department of Rehabilitation and Correction (ODRC) attended an Integration Institute, their program director and program administrator worked closely with the Resource Center's project director to develop a strategic plan for the department. To date, they have held five community engagement events to drive a strategic plan for how to better facilitate healthy family engagement and interaction. Families of the incarcerated, various community agencies, and professional personnel were invited to attend and provide their opinions on the challenges of staying connected to incarcerated individuals as well as on the resources available to help them. The input helped the Department of Rehabilitation and Correction determine the next steps to take in facilitating healthy family engagement. Along with the community conversations, they held eight prison focus groups at seven different institutions across the state. The purpose of the prison focus groups was to learn from participants how prison has affected family engagement. They have talked with and surveyed both male and female offenders from high and low security facilities.

The information gathered from these forums will be used in conjunction with the data gathered via their Survey of Incarcerated Parents (ODRC 2014) and the Family Engagement in Prisons program review (ODRC 2014). The expected outcome is a comprehensive review of practices and protocols with specific recommendations for what the department can do to improve family engagement in facilities and in the community.

ODRC also partnered with a fellow Institute alum from the Marriage Resource Center of Miami Valley on placing RingsChat cards—these are small cards designed to help facilitate meaningful conversations between people—above the phones and in visiting areas in prisons. In the future, they plan to partner with correctional facilities to pilot a program that would incorporate the RingsChat videos that accompany the cards.

Studies also show that openness to new experiences is associated with the acquisition of new skills.²⁵ For example, participants who perceived their agency to be open to new ideas, programs, and ways of serving clients' needs also shared that they felt more able to integrate healthy relationship education as a result of attending a training. Those who integrated relationship education following the training felt an increased sense of competence and skill from the training and perceived their agency to be open and "ready" to address situations in a new way. Often participants felt their agency was "open" and "ready" because of buy-in from their agency leadership or administration.



Collaborating with others, whether in the same agency or across several agencies, is another key strategy to efficiently address the many needs of families and children through healthy relationships. Not only can collaborations address multiple needs, but they can also play a significant role in reaching clients more effectively.²⁶ Readiness to collaborate has been linked to an agency's context (their resources, etc.), their intrapersonal sources (leadership skills, values, etc.), and interpersonal sources (previous experiences collaborating, group size, etc.).²⁷ Interestingly, collaborative readiness (i.e., use of collaborations to get things done, leverage resources, and accomplish mutual goals) is linked to greater understanding of integration of healthy relationship education and personal competency to integrate.²⁸ In essence, the more often collaborations occur with others the more likely providers are to experience

growth in their skills and ability to integrate relationship education. Thus, when more people are working together to integrate, they are able to make greater strides toward integration.

South Carolina Child Support Services

A stakeholder who participated in an Integration Institute shared information he learned with his colleagues and peers after returning to his agency. He also built a collaborative partnership among several fellow Institute attendees. They developed a joint action plan and worked together to carry it out. The group was comprised of stakeholders from Child Support Services, the Department of Social Services, the Department of Corrections, and the Center for Fathers and Families. Together they made plans to integrate both relationship education and fatherhood information into the services being offered within each of their agencies.

The Center for Fathers and Families implements a fatherhood program with a healthy relationship component. The program also includes parenting, economic stability, and job readiness guidance. Others within the partnership are now able to reach out to the Center for assistance in offering these programs to their target audiences, such as non-custodial parents. The Institute attendee from Child Support Services was also invited by a fellow attendee from the Department of Social Services to join the state's Trauma Management team, a group that aims to create a model for trauma-informed care statewide.

Strategies to Integrate Relationship Education

The Resource Center promotes the integration of healthy marriage and relationship education into safety-net service systems as part of a holistic approach to strengthening families. Integration can take place in a variety of settings based on local strengths, needs, and capacity. The specific steps taken to integrate relationship education will most likely be based on an agency's service delivery system and the resources they have readily available. For some, the best approach may be offering handouts during client or in-home visits. A handout on the core relational skill of

communication (<https://goo.gl/wNfA3r>), for example, provides clients with succinct, easy to understand tips for communicating in a healthy way, like by receiving messages through listening silently and reflectively. This type of integration, called basic engagement, is often the lowest-cost approach to increasing public awareness of relationship education. Agencies can also adapt or tailor existing materials to meet their needs instead of developing entirely new materials. For others, the agency may have the capacity to foster partnerships with community agencies that can teach healthy relationship workshops or classes to their clients. Community asset mapping, a process to help a community use its resources to develop a plan, is a good place to start when attempting to identify potential partners that serve the same population and have related goals. Still others may be ready (and able) to implement fully, training their own service providers to discuss and teach healthy relationship skills as part of service delivery.

These three integration strategies are referred to as the "levels of integration" to describe how integration can exist in different forms. Full integration is not the ultimate goal for all agencies, rather, the right level depends on individual factors like the agency's service delivery model and level of interaction with clients. Staff within an agency will have a good sense of which levels are right for them and their clients. A combination of all three might also be what an agency needs. The initial strategy for integration will grow and evolve as the agency and its clients' needs change and as resources change or become available. For stakeholders who may not be sure where to start, the Resource Center offers several resources to 1) help agency staff assess their beliefs and attitudes about relationship education and healthy relationships, and 2) equip an agency to be fully prepared to integrate. Some of these resources are detailed below.

Free Technical Assistance

The Levels of Integration chart shows the three levels of integration:

- Basic engagement,
- Partnerships, and
- Full integration.

It gives examples of the types of free technical assistance that the Resource Center provides at each level. To view the chart, see:

<https://www.healthymarriageandfamilies.org/stakeholder-levels-integration>

Assessments

Relationship Education Assessment. The purpose of the Relationship Education Assessment is to help determine how integrated relationship education is within an agency's services. This assessment is designed to help identify areas for personal development in providing relationship education or assessing staff development needs at the agency or organizational level. The assessment asks about knowledge, attitudes, and behaviors regarding healthy relationships, relationship education, and relationship skill-building activities. If possible, the assessment should be used with individuals from a variety of positions in the agency or organization. This will help give a more accurate picture of individual and agency-wide strengths and areas where there is potential for growth.

To access the Relationship Education Assessment, see: <https://goo.gl/5vibTr>

Readiness Assessment. The Readiness Assessment is designed to assess an agency's level of readiness for integration of relationship education into the services provided. The assessment is broken into four categories of readiness: individual readiness, agency/

organizational readiness, collaboration readiness, and awareness of Resource Center resources. By examining these four categories, an agency can see a more nuanced picture of their readiness to integrate relationship education and pinpoint where there may be barriers to integration. Understanding the levels of readiness within an agency gives staff members a clearer idea of the steps to overcome barriers.

To access the Readiness Assessment, see: <https://goo.gl/kPrzr1>.

Suggested Resources

First Steps to Integrating Healthy Marriage and Relationship Education. This Resource Center webinar highlights the planning and development stages of integrating healthy marriage and relationship education and features speakers who have launched integration efforts in different settings. Speakers describe how relationship education fits with their agencies' missions, what their initial development looked like, and where they see their efforts heading in the future.

To watch the First Steps webinar, go to: <https://www.healthymarriageandfamilies.org/content/first-steps-integrating-healthy-marriage-and-relationship-education-may-14-2013>

The Healthy Marriage and Responsible Fatherhood Initiative. Integration of relationship education may be new to an agency, so for those who would like to learn more about the network of organizations across the United States who share a common interest in improving the lives of children through healthy relationships, visit the website for this initiative: <http://www.acf.hhs.gov/ofa/programs/healthy-marriage>

The website provides a comprehensive list of healthy marriage and relationship education programs, information about responsible parenting, and resources on job and career advancement activities—all of which contribute

to improving children's and parents' overall well-being.

The Resource Center's Virtual Training Center. Promoting relationship education within an agency might seem daunting, but interested stakeholders can register with the Resource Center's free Virtual Training Center (VTC) to learn about effective ways to integrate relationship education at the various levels of integration. Specifically, the VTC's Strong Relationships, Strong Families curriculum educates stakeholders about the importance of healthy marriage and relationship skills and equips them to educate the families they serve about these skills. Module II provides several integration techniques and tools.

To register for the VTC, see: <https://www.healthymarriageandfamilies.org/virtual-training-center>

National Association for Relationship and Marriage Education. The National Association for Relationship and Marriage Education is located at <http://www.narme.org/> and offers resources on topics such as new ways to collaborate with other organizations, what local trainings are being offered on healthy marriages and relationships, and information on public policies that strengthen families.

Conclusion

Developing healthy relationship skills is an important part of a holistic approach to strengthening families. By integrating relationship education into existing services, those who would not typically be exposed to relationship education are given the opportunity to improve relationship skills through the service delivery systems they are already accessing. Relationship education can improve couple relationships, increase the ability of parents to build and model healthy relationship skills for their children, and improve family stability. These critical skills can also enhance the employee-employer relationship and help

support families as they work to achieve self-sufficiency.



References

- ¹ Kohm, L. M., & Toberty, R. K. (2012). A fifty-state survey of the cost of family fragmentation. *Regent University Law Review*, 25, 25-88.
- ² Amato, P. R. (2010). Research on divorce: Continuing trends and new developments. *Journal of Marriage and Family*, 72, 650-666.
- ³ Scafidi, B. (2008). *The taxpayer costs of divorce and unwed childbearing: First-ever estimates for the nation and all fifty states*. New York, NY: Institute for American Values.
- ⁴ Cavanagh, S. E., Schiller, K. S., & Riegle-Crumb, C. (2006). Marital transitions, parenting, and schooling: Exploring the link between family-structure history and adolescents' academic status. *Sociology of Education*, 79, 329-354; Fomby, P., & Sennott, C. A. (2013). Family structure instability and mobility: The consequences for adolescents' problem behavior. *Social Science Research*, 42, 186-201; Strohschein, L. (2005). Parental divorce and child mental health trajectories. *Journal of Marriage and Family*, 67, 1286-1300.
- ⁵ Center on the Developing Child. (2014). *A decade of science informing policy: The story of the National Scientific Council on the developing child*. Cambridge, MA: Harvard University. Retrieved from <http://developingchild.harvard.edu/resources/decade-science-informing-policy-story-national-scientific-council-developing-child/>
- ⁶ Markman, H. J., & Rhoades, G. K. (2012). Relationship education research: Current status and future directions. *Journal of Marital and Family Therapy*, 38, 169-200.
- ⁷ Arnold, A. L., Carlson, M., Grimsley, R. N., & Cenizal, R. (2016). An integrated approach to relationship education: Supporting human services providers to strengthen individuals and families. *Families in Society: The Journal of Contemporary Social Services*, 97, 32-40.

- ⁸ Markman, H. J., & Rhoades, G. K. (2012). Relationship education research: Current status and future directions. *Journal of Marital and Family Therapy*, 38, 169–200.
- ⁹ Rhoades, G. K., & Stanley, S. M. (2011). Using individual-oriented relationship education to prevent family violence. *Journal of Couple and Relationship Therapy*, 10, 185–200; Wadsworth, M. E., & Markman, H. J. (2012). Where's the action? Understanding what works and why in relationship education. *Behavioral Therapy*, 43, 99–112.
- ¹⁰ Antle, B.F., Frey, S.E., Sar, B.K., Barbee, A.P., & van Zyl, M.A. (2010). Training the child welfare workforce in healthy couple relationships: An examination of attitudes and outcomes. *Children and Youth Services Review*, 32, 223–230.
- ¹¹ Burt, M. R., & Nightingale, D. S. (2010). *Repairing the U.S. social safety net*. Washington, DC: Urban Institute Press.
- ¹² Rhoades, G., & Stanley, S. (2009). Relationship education for individuals: The benefits and challenges of intervening early. In H. Benson & S. Callan (Eds.), *What works in relationship education: Lessons from academics and service deliverers in the United States and Europe* (pp. 45–54). Doha, Qatar: Doha International Institute for Family Studies and Development.
- ¹³ Markman, H. J., & Rhoades, G. K. (2012). Relationship education research: Current status and future directions. *Journal of Marital and Family Therapy*, 38, 169–200.
- ¹⁴ Markman, H. J., Myrick, J., & Pregulman, M. A. (2006). Marriage education in the workplace. *Journal of Employee Assistance*, 3, 12–15.
- ¹⁵ Rhoades, G., & Stanley, S. (2009). Relationship education for individuals: The benefits and challenges of intervening early. In H. Benson & S. Callan (Eds.), *What works in relationship education: Lessons from academics and service deliverers in the United States and Europe* (pp. 45–54). Doha, Qatar: Doha International Institute for Family Studies and Development.
- ¹⁶ Shonkoff, J. P., Boyce, W. T., & McEwen, B. S. (2009). Neuroscience, molecular biology, and the childhood roots of health disparities: Building a new framework for health promotion and disease prevention. *Journal of the American Medical Association*, 301, 2252–2259; Wickrama, K. A. S., Simons, L. G., & Baltimore, D. (2012). The influence of ethnicity and adverse life experiences during adolescence on young adult socioeconomic attainment: The moderating role of education. *Journal of Youth and Adolescence*, 41, 1472–1487.
- ¹⁷ Center on the Developing Child. (2011). *Building the brain's "air traffic control" system: How early experiences shape the development of executive function (Working Paper No. 11)*. Cambridge, MA: Harvard University. Retrieved from http://developingchild.harvard.edu/resources/reports_and_working_papers/working_papers/wp11/
- ¹⁸ Halford, W. K., Markman, H. J., Kline, G. H., & Stanley, S. M. (2003). Best practice in couple relationship education. *Journal of Marital and Family Therapy*, 29, 385–406.
- ¹⁹ Hawkins, A. J., Carroll, J. S., Doherty, W. J., & Willoughby, B. (2004). A comprehensive framework for marriage education. *Family Relations*, 53, 547–558.
- ²⁰ Rhoades, G., & Stanley, S. (2009). Relationship education for individuals: The benefits and challenges of intervening early. In H. Benson & S. Callan (Eds.), *What works in relationship education: Lessons from academics and service deliverers in the United States and Europe* (pp. 45–54). Doha, Qatar: Doha International Institute for Family Studies and Development.
- ²¹ Barrick, C., & Homish, G.G. (2011). Readiness to change and training expectations prior to a training workshop for substance abuse clinicians. *Substance Use & Misuse*, 46, 1032–1036.
- ²² Futris, T.G., Schramm, D.G., Richardson, E.W., & Lee, T.K. (2015). The impact of organizational support on the transfer of learning to practice. *Children & Youth Services Review*, 51, 36–43; Sabol, W.J., Coulton, C.J., & Korbin, J.E. (2004). Building community capacity for violence prevention. *Journal of Interpersonal Violence*, 19, 322–340.
- ²³ Antle, B.F., Barbee, A.P., & van Zyl, M.A. (2008). A comprehensive model for child welfare training evaluation. *Children & Youth Services Review*, 30, 1063–1080; Arnold, A. L., Richardson, E. W., & Cenizal, R. (2016). Ready or not: The influence of readiness on healthy marriage and relationship education training outcomes. *Children and Youth Services Review*, 63, 67-73; Burke, L.A., & Hutchins, H.M. (2007). Training transfer: An integrative literature review. *Human Resource Development Review*, 6, 263–296.
- ²⁴ Arnold, A. L., Richardson, E. W., & Cenizal, R. (2016). Ready or not: The influence of readiness on healthy marriage and relationship education training outcomes. *Children and Youth Services Review*, 63, 67-73; Sitzmann, T., Brown, K.G., Casper, W.J., Ely, K., & Zimmerman, R.D. (2008). A review and meta-analysis of the nomological network of trainee reactions. *Journal of Applied Psychology*, 93, 280–295.
- ²⁵ Herold, D.M., Davis, W., Fedor, D.B., & Parsons, C.K. (2002). Dispositional influences on transfer of learning in multistage training programs. *Personnel Psychology*, 55, 851–868.
- ²⁶ Mancini, J.A., Nelson, J.P., Bowen, G.L., & Martin, J.A. (2006). Changing the ways communities support families to prevent intimate partner violence. *Journal of Aggression, Maltreatment & Trauma*, 13(3/4), 203–227; Walter, U.M., & Petr, C.G. (2000). A template for family-centered interagency collaboration. *Families in Society*, 81, 494–503.
- ²⁷ Hall, K.L., Stokols, D., Moser, R., Taylor, B., Thornquist, M., Nebeling, L.C. C., Jeffery, R.W. (2008). The collaboration readiness of transdisciplinary

research teams and centers: Findings from the National Cancer Institute's TREC Year-One evaluation study. *American Journal of Preventive Medicine*, 35, S161–S172.

- ²⁸ Arnold, A. L., Richardson, E. W., & Cenizal, R. (2016). Ready or not: The influence of readiness on healthy marriage and relationship education training outcomes. *Children and Youth Services Review*, 63, 67-73.

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