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# Healthy Relationships Utah During COVID-19

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# Healthy Relationships Utah During COVID-19

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Major program theme: Relationship Education

## **Abstract**

This article highlights the *Healthy Relationships Utah* initiative's transition from in-person to virtual classes due to COVID-19. Outcomes were largely positive, with few differences found between in-person and virtual formats. Results point to the potential for increased accessibility for relationship education through dual-delivery formats.

### Introduction

Healthy Relationships Utah (HRU), a Utah State University Extension initiative, provides statewide, grant-funded relationship education programs for youth, adults, and families. Historically, these programs have been offered in-person in partnership with high schools, state agencies, jails, and community agencies. Since 2006, HRU's programs have served more than 75,000 adults and youth throughout Utah.

In March 2020, restrictions related to the COVID-19 pandemic required the postponement, and in some cases the cancellation, of in-person relationship education classes and a subsequent transition to virtual classes for all *HRU* programs. This article highlights the steps taken to respond to this problem, particularly as it relates to the transitions made to facilitate *HRU*'s *PICK* (Premarital Interpersonal Choices and Knowledge) program, a relationship education class for single adults.

## Response

Virtual classes were implemented for adults in April 2020 through Zoom software. Virtual classes mirrored in-person classes in terms of content, group format, and scheduling, with the only difference being participants met in a virtual classroom. This article considers the *PICK* program for single adults, which has also been branded as "How to Avoid Falling for a Jerk." *PICK* has been found to help single adult participants build high-quality relationships (Bradford et al., 2016). The program can be taught in 6-8 hours and is typically implemented over weekly two-hour sessions. Topics include the importance of getting to know potential partners (*Knowledge*), healthy relationship boundaries (*Boundaries*), the ability to maintain healthy relationships (*Confidence*), how to recognize warning signs and unhealthy relationships (*Warning Signs*), and conscientious relationship decision-making (*Deciding*).

A pretest-posttest approach was used to evaluate whether participants increased their knowledge of these topics. Data from both in-person and virtual participants allowed for comparisons between delivery formats before (January – March) and after the transition (April – June). Qualitative data provided insight on participant experiences with virtual formats.

## **Participants**

A total of 201 individuals participated between January and June 2020. On average, participants were 38 years old, 77.3% were female, 86% were Caucasian, 12% were Hispanic/Latino, 28% held a Bachelor's degree, 77% were single, 74% were employed, and 15% reported personal incomes between \$30,000-39,999.

A majority of the sample (65.2%) participated virtually. Virtual and in-person participants differed significantly by average age (35 for virtual versus 43 for in-person participants). Other differences were found for gender (74% of virtual participants were female versus 83% for in-person) and education (32% of virtual participants held a Bachelor's degree versus 20% for in-person).

## **Outcomes and Impact**

### **Evaluating Program Outcomes**

Paired-samples *t*-tests evaluating the short-term outcomes of *PICK* for the entire sample identified statistically significant increases for all five measures from pretest to posttest (p < .001). The largest increases were found for *Warning Signs* (MD = 0.91; SD = 0.73; d = 1.11), followed by *Confidence* (MD = 0.66; SD = 0.75; d = 0.85), *Boundaries* (MD = 0.57; SD = 0.62; d = 0.85)

= 0.81), Deciding (MD = 0.31; SD = 0.49; d = 0.61), and Knowledge (MD = 0.29; SD = 0.34; d = 0.69).

# **Group Comparisons**

A series of repeated measures ANOVA were employed to examine whether there were any between-subjects interaction effects by delivery format for program outcomes (pretest to posttest). Analyses revealed no statistically significant interactions between in-person and virtual format participants.

## **Participant Experiences**

Through qualitative data, participants described what they liked and disliked about the classes. The following themes emerged related to the virtual format.

**Likes.** Several participants specifically endorsed the virtual format. One participant noted: "This was the second time I took this course and I felt the Zoom format was better because I was able to get home, pop open a laptop, and have an open conversation. Whereas the other class I had to drive to the destination, which made it difficult to want to go. Online just made it more accessible. My hope is that online options become more available for future participants." Another participant stated: "I could do it in the comfort of my home and was able to still learn during these times of uncertainty."

**Dislikes.** Other participants were less positive, noting that the virtual format limits social interaction, with participants stating: "I would have liked it in person instead of online. I think it would have been more personable" and "I think it would have been better to be in person in order to get to know other people in the course better, online format wasn't really good for that."

#### **Public Value**

COVID-19 has required Extension to make adjustments to normal operations (Jewkes et al., 2020) and modify how educational services are provided to clientele (Arnold & Rennekamp, 2020). In the case of *HRU*, adjustments involved the transition from in-person to virtual classrooms. On average, the virtual format attracted *PICK* participants who were younger and more educated compared to the in-person format. Additionally, more males attended virtually than in-person. Data showed no significant differences in program outcomes by format: participants in both in-person and virtual classes reported benefits on targeted outcomes related to relationship knowledge, boundaries, confidence, warning signs, and decision-making. Qualitative responses were mixed in terms of participant perceptions toward virtual programming, pointing to both the benefits and challenges associated with such a delivery method.

These findings provide support for the effectiveness of the *PICK* program, regardless of format. They also reinforce the ability of Extension to adapt and meet participant needs. The findings may promote a dual-delivery approach to future relationship education programming inasmuch as some participants prefer one format over the other. Providing relationship education in both virtual and in-person modalities would increase the accessibility of Extension programming for people statewide with different learning preferences.

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