

Expectations About Couple Therapy Over Time

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Abstract One common factor of therapy, expectations, has been demonstrated to be a significant contributor to outcome in individual therapy. Despite this, little is known about expectations about couple therapy. This paper presents the qualitative results of a study exploring clients' expectations before beginning couple therapy and after six sessions. Results indicate that clients form pre-therapy expectations about their therapist, the process of therapy, and their partner. Results also showed that after six sessions, clients' expectations about therapy were often met or modified in ways that were positive. Implications for therapists and researchers are included.

Keywords Expectations · Couple therapy · Expectancy effects

Introduction

Researchers in the field of couple and family therapy have demonstrated that couple therapy is generally effective and efficacious in creating positive changes in the lives of clients with mental health problems, decreasing the likelihood of divorce, and improving individual and family health and well-being (c.f. Sprenkle 2003). Despite generally positive

outcomes, incidences of premature termination from therapy are high (Wierzbicki and Pekarik 1993) and some couples fail to improve during couple treatment (Jacobson and Addis 1993). In recent years, there has been an emphasis on understanding therapy experiences, including client experiences over the course of therapy. Such inquiries have resulted in analyses that suggest that treatment failures may represent a failure of therapists to provide treatment that meets the expectations of clients (Joyce and Piper 1998). Past research has suggested a link between clients' expectations about therapy, positive therapy experiences, and good therapy outcomes.

Lambert (1992), in his analysis of common factors that contribute to change in psychotherapy, identified expectations as the third most influential factor. Lambert suggested that expectations explain approximately 15 percent of the variation in therapy outcome and are more influential than model, technique, or training. This provocative research echoed what many clinicians already knew—clients' hopes, expectations, and understanding about therapy impact therapy outcomes.

Research has clearly established that clients enter into therapy with expectations about the process of therapy and the personality, training, or experience of the therapist and that these expectations influence in session behaviors and outcomes (Glass et al. 2001; Joyce et al. 2000; Tinsley et al. 1984). Specifically, expectations of improvement have been linked to positive feelings about therapy, successful engagement, and positive outcomes in therapy (Tinsley et al. 1984). Decades of research has addressed expectations in individual and group treatment (see Tambling 2012 for a review), clearly indicating that expectations are predictive of a variety of therapy outcomes, suggesting expectancy effects exist in therapy settings. While most research has explored expectations in

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individual and group treatment, one study (Tambling and Johnson 2010), found expectations about the therapist and the experience of therapy inform clients' actual experiences in couple therapy, specifically. Others (Tambling et al. 2014) found that clients attend couple therapy with clear expectations regarding their therapist, therapy experience, and the outcome of therapy prior to their first session. Clients also form expectations about their partner's behaviors and partner-initiated topics of discussion in therapy. Combined, these studies all suggest that expectations are powerful factors that contribute to therapy experiences.

While it is clear that expectations about therapy are formed prior to therapy, very little is known about the ways that expectations are confirmed, disconfirmed, modified, and developed over time. Virtually nothing is known about the ways in which actual experiences in therapy influence the modification of expectations, or whether expectations about therapy are confirmed or disconfirmed by actual therapy experiences.

The present, exploratory, study examined clients' expectations about therapy. Specifically, the present study focuses on the ways in which expectations about therapy are modified, confirmed, or disconfirmed following the initiation of therapy. This research was conducted as part of a larger study of expectations about couple therapy. Interview data were examined using qualitative methods. The following three exploratory research questions were addressed:

1. Are expectations about therapy from the initial therapy session confirmed or disconfirmed during subsequent therapy sessions?
2. What new expectations are formed following the onset of therapy?
3. In what ways do clients of couple therapy believe that therapy will help with their presenting problems; is this impacted by therapy experiences?

Methods

Procedures

Data for the present study were interviews of participants in a larger study of expectations about couple therapy. The results of the exploration of pre-therapy expectations has been published and additional information regarding pre-therapy expectations can be found in that manuscript (Tambling et al. 2014). Participants were twenty individuals in ten couples seeking therapy at a university-based marriage and family therapy clinic. All couples consisted

of individuals over the age of 18 in a relationship over 6 months long who both deemed their relationship as romantic and significant. The sample consisted of 19 heterosexual couples and one same-gender couple. Thirteen (65 %) of the participants identified as Caucasian, three as Indian (15 %), two as Hispanic (10 %), one as Asian (5 %), and one identified as Pakistani (5 %). All participants possessed at least a high school education: 10 % completed trade school, 10 % were currently enrolled in a 4-year college program, 15 % graduated from a 2-year college, 15 % graduated from a 4-year college, 25 % had a Master's degree, 15 % completed some graduate studies, and 10 % completed post-Master's studies. Incomes ranged from \$20,000 to over \$70,000 annually. On average, participants were 29.14 years old, ranging from 21.08 to 37 years of age. Participants were recruited through university list-serve emails and paid newspaper advertisements in the local community. After consent was obtained from both partners, participants were interviewed conjointly by a member of the research team prior to their first session of therapy, and after each of the second through fourth therapy sessions. Interviews focused on clients' expectations about therapy using a semi-structured interview protocol. Interview questions addressed therapist expectations, role expectations, and process expectations. Interviewers inquired about the ways in which expectations were met or not met, as well as new expectations that may have been formed since the onset of therapy. Interviews were audio-recorded, and then transcribed and analyzed using a discovery-oriented qualitative analysis.

Interview Protocol

The interview protocol was developed by the first author, an expert in expectations about couple therapy, following a comprehensive and systematic review of the extant literature about expectations about therapy. The interview questions were then evaluated and discussed with a second researcher not involved in the present study who is familiar with the literature about expectations about couple therapy. The interview protocol is provided as "[Appendix A](#)". Questions focused on the ways in which expectations were met or not met by actual therapy experiences and the ways in which expectations were modified over time. All interviews were conducted by a member of the research team, each of whom have training in interview techniques and are familiar with research about expectations about couple therapy. Questions were posed as written, and interviewers were encouraged to obtain answers from both couple members and to ask follow up questions. Interviews ranged in time from 15 to 25 min, approximately.

Qualitative Analysis

Reliability and Validity

The researchers enhanced validity by following the recommendations of Silverman (2000). First, a recursive analysis process was used in which the researcher began by reading through all the transcripts to get a sense for the data as a whole. Codes and themes were developed during subsequent readings of transcripts. As emerging themes were developed, the researchers re-read transcripts to ensure that the codes and themes represented the whole of the data. The primary way in which reliability was enhanced was by carefully documenting all procedures. The researcher and interviewers kept detailed field notes of impressions, questions, and ideas and met weekly to discuss these ideas. Further, the researchers kept a detailed process journal during coding. To ensure that the interpretation of the data was reliable, a researcher familiar with the therapeutic process, but unfamiliar with research related to expectations about therapy read a random sample of three transcripts to evaluate whether the coding of the transcripts seemed reasonable and credible. After discussions with the reviewer were complete, the researcher then conducted a final read of the data to determine that the codes represented were those that were a good fit for the data.

Analysis

Interview data were analyzed qualitatively to explore patterns and themes that were grounded in the participants' experiences. Data were analyzed systematically and recursively to locate and identify emerging themes using a constant comparison analysis (Silverman and Marvasti 2008; Strauss and Corbin 1994). ATLAS.ti software was used to aid in the management and organization of the data. First, the second author read through all the transcripts from all the groups to get a sense of the data as a whole. The researcher kept a logbook with observations, questions, and ideas noted. Emerging themes were developed, modified, and compared during subsequent readings of the transcripts. This process increased the likelihood that the codes captured all relevant data and that codes represented good descriptors of the data as a whole. A second member of the research team independently read and coded the transcripts, following the same process, and developing a second preliminary code list. The two coders met and discussed the codes. Discussion proceeded until consensus was developed and a final code list established. Both coders were familiar with literature about expectations about counseling, are couple therapists, and were familiar with the methods of the present study.

Results

During the analysis, unique instances of dialog were coded, and from those codes, themes were developed. A list of codes and themes is included in Table 1. Expectations were generally positive about the therapist and the therapy process. Many clients identified expectations that were related to the therapist being kind, calm, and engaging. Clients seemed to expect their partners to be open and honest and for the process of therapy to be helpful. Notably, the researchers found consistency across transcripts in the ways in which clients talked about expectations being met or not met. The researchers elected to use language consistent with previous literature regarding expectations about couple therapy being met or not met (c.f. Tambling 2012), referring to that phenomenon as the confirmation or disconfirmation of expectations.

During the coding process, a consistent theme began to emerge across categories of codes. That is, that expectations were occasionally not met, resulting in a disconfirmation of expectations. What is unique about this research is that this disconfirmation was not negative, as clients reported that expectations were not met in positive ways. One participant stated it in this way:

Participant: It doesn't fit with what I expected, but I'm quite happy with the turnout

This finding is unique to this study. No previous study of expectations noted the disconfirmation of expectations in a positive direction. Thus, this unique finding is of note as a general phenomenon of interest in the present study.

Research Question 1. To answer the first research question—whether expectations from the first therapy session were confirmed or disconfirmed as a result of therapy—coders focused on responses to questions directly related to the ways in which expectations are met or not met. Table 1 presents the results of this inquiry. In general, role expectations were confirmed. With regard to expectations about the therapist, six couples reported that their expectations were confirmed in that the therapist was warm, calm, and young. One participant stated:

Participant: Yeah, I think she met my expectations, um I remember saying that I thought my therapist would be female and that she'd be friendly, so she did a really nice job with that. Meeting those.

Two couples reported that their expectations were not met. One couple reported that they had two therapists instead of one, as they had expected. Others identified the therapist as being younger than expected, or more relatable than expected. Of note, one couple reported that their

Table 1 Qualitative themes, expectation confirmation and disconfirmation

Role expectations	Process expectations	Expectations of partner
Confirmed—6 couples	Confirmed—5 couples	Confirmed—6 couples
Competent	Helpful	Opened up about feelings
Warm	Challenges	Spoke honestly
Calm	Communication skills	Motivated to make changes
Unbiased	Felt heard	Wants to make relationship better
Female	Disconfirmed—2 couples	Exceeded—4 couples
Friendly	Therapist's model was different than expected	Revealed unexpected emotions and thoughts
Challenged current behavior and thinking	Exceeded expectations—3 couples	More emotionally expressive
Got us talking about the issues	More use of activities	More insightful than expected
Disconfirmed—2 couples	Better than previous experiences in therapy	More open to criticism
Younger	More comfortable and engaging	Applied skills learned in therapy
Didn't point out our flaws		
Had two therapists instead of one		
More relatable		
Exceeded—1 couple		
Felt more understood and comfortable than expected		
Therapist remembered more details than expected		

expectations were not met, but were exceeded. They noted feeling more comfortable and understood than they had expected.

With regard to process expectations, or expectations about the way in which therapy will be conducted, expectations were generally confirmed. Five couples reported that the process was as expected in that they were challenged by the therapist and worked on communication skills. Two couples indicated that their expectations were not met in that the approach was not as expected. They did not elaborate on this point, but indicated that it was simply not what they had imagined. Three couples noted that their expectations were disconfirmed in positive ways, through the use of more activities, more engagement, and experiences that were more positive than previous experiences in therapy.

Finally, all couples reported that their expectations about their partner were confirmed, or disconfirmed in ways that exceeded their expectations. Respondents reported that partners were either more open than expected or as open as expected, such as the following quote demonstrates:

Participant: A little different, um, I think I expected [my partner] to be more closed and he was you know more closed than I am, but he was more open than I expected him to be like he was more insightful and thoughtful and shared more than I expected him to and that was very exciting for me.

Couples reported that their partners seemed motivated and spoke honestly. Others reported that their partner was more expressive and insightful than anticipated.

Research Question 2. To answer research question 2, determining whether new expectations were formed as a result of therapy, coders examined both questions related to the formation of new expectations, and the responses to all questions. Results of this inquiry are presented in Table 2. Most participants were able to identify at least one new expectation that had emerged as a result of therapy. For many respondents, these expectations were related to the role they, or their partner, would take in therapy. Some noted more clear expectations about their partner's behavior, such as the following:

Participant: Well, I feel like I expect him to um, tell me more about what he's feeling and what's going on um, in his life and with uh, certain like vices that he has. Um, I feel like that's still like, not completely happening, but it's happening more. Um, I'll have to like probe him about it and then he'll like, eventually he's honest with me about it, but, so that's the expectation I have.

Notably, many participants found themselves having more positive outcome expectations following the onset of therapy, such as the following participant exemplar indicates:

Participant: Yeah, I think we might actually, now we might actually be able to achieve our goal of not really, you know, not having our arguments escalate you know to a level that uh, is really causing a lot of problems and brought us to therapy in the first place and you know, honestly I was a little, you know,

Table 2 Qualitative themes, new expectations formed

Expectations for self	Expectations for partner	Expectations for couple	Expectations for therapy
Use techniques learned in therapy	Consistent emotional expression	Use strategies learned in therapy more consistently	Fast progress
Slow interactions and evaluate expectations	Informing partner about everyday life	Communicate more	Bigger changes
Prioritize the relationship	Express concerns and vices	Talk more openly without need of therapist	More solutions
Take appropriate responsibility rather than placing all expectations on partner	Honesty	Return to conversation after taking a break	

disheartened or skeptical that uh, that would be possible when we came here, but uh, you know, I think, uh, I think it might actually be possible now.

Research Question 3. Finally, research question 3 addressed outcome expectations formed following the onset of therapy. Participants were asked, “Think about the problems that brought you to therapy. What do you expect will change about these as a result of therapy?” Responses were explored for themes. Most clients reported a desire for therapy to continue, and expressing pleasure with the outcome after the first four sessions. One participant stated:

Participant: We’ve found it- I’ve found it very helpful. And we want to continue working on like our communication skills, resolving arguments, things like that, so we’re definitely, we’ve had a great experience doing, taking part in the study and working with [the therapist] and we want to continue doing that.

The following themes emerged among expectations about outcomes: easier to compromise, problems will be managed better, be more considerate and aware of partner’s perspectives, discover more about self, develop skills, improve communication, more honesty, continue being able to discuss things more calmly/avoid escalation, better recognize problems and ask for help, and view problems more realistically. One participant shared a common experience, stating:

Participant: I hope to be more considerate and aware of what might be going on from the other perspectives. From my husband’s perspective, from my kid’s perspectives. It’s not just what I’m feeling all the time.

Discussion

Overall, results indicated that expectations were generally confirmed. For the most part, clients’ experiences in session were congruent with that which they expected. For

example, therapists were competent, understanding, and warm. Clients reported that they experienced therapy processes that were expected, including challenges and homework assignments. Most clients reported that they expected therapy to be helpful and it was. This is consistent with previous literature about expectations about therapy, which suggests that clients generally have positive expectations about therapy (Tambling 2012). Such a view is also consistent with the generally accepted view of the role of expectations in the common factors literature. In his review of common factors, Lambert (1992) suggests that expectations about therapy can positively impact therapy processes and outcomes. The implication of such statements is that positive, or realistic, expectations about therapy can influence therapy processes and outcomes in useful ways. Findings of the present study support the contention that positive expectations beget positive outcomes (Table 3).

Results indicated that clients reported that they formed new expectations over the course of therapy. Though the majority of interviewees did not respond to this question as the researchers intended it, the information is useful. The researchers had anticipated that clients would form realistic expectations about the future of therapy after having more experience with therapy, but most clients were vocal about the ways in which their expectations of the partner were evolving over time. Most of these expectations related to the way in which the couple would interact with one another. For example, participants reported that they expected to communicate better, share more, and to solve problems more effectively. The researchers had expected that clients might form new expectations about therapy; however, the majority of participants responded to the prompt by sharing expectations about their couple relationship. Future researchers may wish to reconsider how to ask this question to learn both about therapy expectations and relationship expectations. Finally, participants reported that their experiences with their partner in therapy were as expected. Clients reported that partners were open and talkative in therapy.

While most experiences were consistent with expectations, some clients experienced deviations from their

Table 3 Thematic groupings and codes

Thematic grouping	Codes
Expectations about the therapist	Female Graduate student Young Soothing/calm Friendly/nice Media-influenced
Expectations about the process	Talk about issues and efforts to solve Go deeper/challenge Guidance/advice/suggestions Be offered a different perspective Media-influenced
Therapist behavior	Ask questions Assess/learn about clients Listen
Therapy topics	Presenting problem Conflict Communication Relationship history Personal history
Partner behavior	One partner will do most of the talking Listen Talk/open up Be cooperative/work together
Outcome	Learn skills/techniques Communicate better Acceptance and understanding of partner Decrease negative behaviors Increase self-awareness Resolve problems

expectations. The most notable way in which expectations differed from experiences is with regard to therapy processes. Clients reported deviations from expectations most with regard to the way that therapy was conducted. While some of these failures to confirm expectation were good (i.e. therapy was better, or the clients felt more heard), some reflect a fundamental confusion about what therapy will be like. For example, some clients reported that they expected to talk about their past more or less than they did. Others reported that they expected a more traditionally psychodynamic or more psychoeducational style. Therapists may use this information as an indicator that clients do not know what to expect from therapy and may wish to talk with clients early in the course of therapy about how therapy will be conducted.

Other disconfirmations were related to role expectations. In particular, clients reported that therapists were younger than expected. This finding is likely an artifact of the research setting. The research was conducted in a training

clinic, where all therapists are masters and doctoral students. Thus, the majority of therapists are indeed young. Other ways that therapists did not meet expectations may be interpreted as a positive failure to meet expectations. For example, therapists were unlike therapists portrayed in media, as the therapists in this study were professional and personable. Therapists were also noted to be more attentive, honest, and relatable than expected. These disconfirmations were generally experienced as positive, and may enhance the potential positive impact of the common factor of expectations.

Finally, participants reported several disconfirmations related to the partner's behavior. Clients reported that their partners were more open than expected and tried more things from therapy than expected. Interestingly, participants reported that they were able to learn a lot about their partners with the help of the therapist. Participants reported that partners surprised them in ways that likely benefitted the relationship.

Overall, results from this study suggest that clients not only form and modify expectations about therapy, including the therapist and the process of therapy, but also form and modify expectations about the partner and the partner's behavior. These results, taken together, provide an encouraging picture of therapy. Participants of this study expected therapy to be helpful and generally found that it was, albeit in occasionally unexpected ways. Further, clients found that their expectations disconfirmations were generally good, and enhanced positive feelings about the therapy process.

There are several limitations of this study which impact the interpretation of results. First, the sample is small and was drawn from only one clinic. Thus, the results may be limited to the clinic, or a population similar to the sample that was studied. Further, the clinic from which participants were drawn was a training clinic and the results may not be generalizable to typical community clinics or private practices. As with all qualitative research, bias on the part of the researchers is not only possible, but likely. The researchers were all experts in expectation formation and maintenance and their understandings of the topical area may have impacted the interpretation and distillation of themes.

As this is one of few studies of expectations in couple therapy, little is known about the ways in which the results of this study might fit with other, similar studies. Given the relative lack of information about research on expectations about couple therapy, future research which explores expectations in a couple therapy context is warranted. Future studies are needed that not only explore expectations in a couple therapy setting, but examine those expectations over time. Further, future researchers may wish to take a more comprehensive view of expectations exploration and engage in research which includes more in-depth interviews. It was beyond the scope of this project to conduct a qualitative study truly informed by grounded theory. Such an inquiry would be valuable. It is possible that a great deal of information about expectations was missed given the interview protocol used, so a more thorough exploration would be useful.

There are several implications for therapists given the findings of the present study. First, the results of this study suggest, once again, that expectations are formed prior to therapy. Therapists should inquire about expectations during the first session of therapy to gather important data about the ways in which clients anticipate therapy will progress. The results of the present study also suggest that expectations, particularly those about the partner, are modified during the course of therapy. Therapists may wish to inquire with clients about the ways in which their expectations are confirmed or disconfirmed during the course of therapy and whether those experiences are

helpful, or positive. It may also be useful for therapists to inquire about the role of the partner in therapy and to make more overt the process by which clients are positively surprised by their partner in therapy. Collectively, the results of this study suggest that clients do think about therapy and the therapeutic process. Therapists are encouraged to explore the expectations process as part of any discuss of therapeutic processes.

Despite some limitations, this study provides preliminary evidence to suggest that expectations about couple therapy are impacted by the therapy process. Expectations are generally confirmed, but disconfirmations are present. It is interesting to note that many of the disconfirmations present in this study were positive disconfirmations, a unique finding. Future research is needed to further explore this phenomenon and better understand client expectations about therapy, and the way in which expectations impact therapy outcomes.

Compliance with Ethical Standards

Conflict of interest The authors declare that they have no conflict of interest.

Appendix A: Interview Protocol, Follow up Session

The following are questions about the ways in which your expectations were related to your therapy experiences. You may not have thought about some of these questions.

1. In what ways was your therapist like or not like what you expected?
2. In terms of what's happening in therapy, how does this fit or not fit with what you expected?
3. In what ways has your therapist surprised you?
4. In terms of how your partner has behaved in therapy, how does this fit or not fit with what you expected?
5. In what ways has your partner surprised you?
6. What new expectations have you developed since you've begun therapy?
7. Think about the problems that brought you to therapy. What do you expect will change about these problems as a result of therapy?

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