A descriptive literature review of early research on COVID-19 and close relationships

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Abstract
This in-depth critical review investigates the impact of COVID-19 on personal relationships from the start of the pandemic in early 2020 to September 2021. Research examining six themes are identified and described in detail: the impact of COVID-19 on (1) family and intimate relationships; (2) LGBTQ+ relationships; (3) how COVID-19 is linked to technologically mediated communication and personal relationships; (4) potential shifts in sexual behaviors and desire; (5) potential shifts in relational conflict and intimate partner violence; and (6) constructive aspects of personal relationships, which is a broad theme that includes outcomes such as resilience, relational quality, coping, and social support. Findings for overarching patterns are offered to highlight implications for current research and identify future directions to consider when continuing to study personal relationships during the COVID-19 pandemic and similar future crises.

Keywords
COVID-19, families, couples, sexuality, health, abuse/aggression

In early 2020, the virus that causes COVID-19 – severe acute respiratory syndrome Coronavirus 2 (SARS CoV-2) – began to rapidly spread among human beings via social
contact. On March 11, 2020, the World Health Organization declared COVID-19 a pandemic and by month’s end, social distancing orders were mandated, and travel restrictions were in place in most areas globally (Katella, 2021). International borders were closed, stay-at-home orders were instituted, and individuals were required to “shelter in place” for many months of uncertain ebbs and flows as COVID-19 cases subsided and then once again surged.

By early 2021, multiple vaccines were introduced and, along with booster injections, are widely and freely available in most first-world countries at the time of this writing. However, numerous COVID-19 waves and variants, caused by lack of widespread vaccine availability worldwide, rampant vaccine and virus dis- and misinformation, vaccine hesitancy, and the dominance of more transmissible variants continues to create an ambiguous, ever-shifting pandemic situation worldwide. Individuals are also experiencing message fatigue in relation to the ongoing pandemic, reducing adherence to CDC guidelines and message importance (Ball & Wozniak, 2021), creating a more volatile social and health information climate as the crisis continues into its third year.

To say that COVID-19 infiltrates almost all aspects of human life is an understatement. The virus substantially impacted individual well-being, work and home lives, finances, and personal relationships around the world. For example, the most consistent, strongest longitudinal predictor of decreased mental health in Americans early in the pandemic was increased perceived social strain in relationships that typically provide support (Zhou et al., 2020). Further, when examining data across 39 countries, relational mobility, or an individual’s ability to form partnerships, predicted the spread of verified COVID-19 cases as well as COVID-19 related deaths (Salvador et al., 2020). In fact, as a stark example, if the U.S. (a high relational mobility country) was similar in this mobility to Japan (low relational mobility), American COVID-19 deaths at the conclusion of the first 30 days of each country’s outbreak period would have been 281 compared to the 3417 that were actually reported (Salvador et al., 2020).

However, personal relationships have proven to be more complicated than any single factor, such as social strain or relational mobility, in predicting relational outcomes during the COVID-19 pandemic. Close relationships predict societal and individual well-being (e.g., Baiocchi-Wagner, 2015). In a crisis where individuals are limited in their choice(s) of physical distance and mobility, it is critical to understand how close relationships are impacting individual health. Data from almost 3600 participants from 57 countries showed that experiencing greater social isolation related to COVID-19 was linked to lower romantic relationship satisfaction and commitment, as well as increased conflict with a romantic partner. However, being a highly responsive partner could attenuate these associations (Balzarini, Muise, Zoppolat, Di Bartolomeo et al., 2022). Further, longitudinal and cross-sectional data showed relatively little social connection changes during early COVID-19, possibly because they learned methods of substituting their typical interactions for new ones (e.g., replacing face-to-face with videoconferencing; Ankin et al., 2022). These findings highlight the importance of understanding close relationships in the COVID-19 context and exploring how relational outcomes are associated with individual and relational well-being.
In evaluating the impact of COVID-19 on close relationships, it is critical to be reflexive in our approach to reviewing the literature and of our own positions as individuals and researchers. We are five personal relationship researchers who represent a range of backgrounds in interpersonal, family, and health communication, and social and personality psychology. We observe our “research world” primarily through a post-positivistic lens, though we recognize and appreciate the value of interpretivist and critical perspectives in all areas of social scientific inquiry. As such, the bulk of our research is quantitative in nature, though a notable subset is qualitative. Individually and together, we have been at the forefront of studying COVID-19’s impact on personal relationships and believe that those experiences afford us the ability to both step back and broadly view this important topic across research studies while also narrowing in and identifying the more subtle nuances that may emerge across specific findings.

In terms of our identities, all five of us are Americans who live in the U.S., are White, and cisgender. Four of us are heterosexual and one of us identifies as lesbian. Four of us are in the early-to mid-range of our careers and hold full-time academic appointments, while one of us is an advanced graduate student. As a group, we lack nationality and racial diversity, which we have tried to remain conscious of as we engaged in this review. However, because of our diverse professional makeup, we hope to offer a unique set of perspectives that embodies both communication and psychology research as we address this important topic.

Scope and method

The goal of the current review was to explore the impact of the early phases of the COVID-19 pandemic on close, personal relationships. The scope of our review was determined by the degree to which COVID-19 was examined and/or considered contextually in an empirical research study and ensuring that the study was solidly focused on close relationships. We conceptualized COVID-19 as an external stressor (consistent with Balzarini, Muise, Zoppolat, Di Bartolomeo et al., 2022; Pietromonaco & Overall, 2021). In doing so, we initially sought to identify peer-reviewed articles that included anything relevant to the pandemic and personal relationships. To be considered for our review, a particular study had to measure or clearly incorporate the context of COVID-19 into the research that was conducted, as opposed to the pandemic simply occurring while data were being collected or serving as a distal, background context. For example, a study that assessed mental health directly related to COVID-19 in relation to romantic partner social support during the first phase of lockdown would qualify for this review; however, a study that examined mental health and romantic partner social support with data simply collected in April 2020 “during COVID-19” with no reference to it for participants in the data collection materials would not. Second, “close relationships” for our purposes includes family and romantic relationships, which traditionally are viewed in almost every culture as our two closest and most important relational structures. Although we sought to include friendships as well, only minimal research on COVID-19 and friendships had been conducted at the time this review was written.
(e.g., Bond, 2021; Fried et al., 2021; Juvonen et al., 2021), limiting our ability to fully comment on how this relationship type has been impacted by the pandemic.

Finally, the research we include in this review primarily focuses on engagement within close relationships, while also fully engaging with the study of close relationships and COVID-19. “Engagement with” includes specific concepts such as conflict, coping strategies, sexual behaviors, relationship satisfaction, and intimate partner violence. Concepts not fitting within this classification include general loneliness, broad technology use patterns, and overall social support (e.g., number of close relationships). “Fully engaging” means focusing primarily on social/personal relationship concepts and/or contexts, as opposed to measuring one or two social relationship concepts in a larger constellation of demographic, social, and health variables.

The timeline for research selected for this review generally reflects the intersection of the emergence and continuation of COVID-19 and the necessary delay associated with conducting and publishing academic research. Relevant articles were not published until mid-2020. New research was continually being published and this review was accordingly updated as it was being written and edited. As such, our methodology for seeking research studies to include was as follows. First, we sought research from relevant known special academic journal issues, including the Journal of Social and Personal Relationships, Journal of Family Communication, Archives of Sexual Behavior, Cyberpsychology, Behavior, and Social Networking, and Family Relations. Then, we searched for additional relevant research (using each of the terms “COVID-19,” “coronavirus,” and “pandemic” throughout) matched with combinations of “romantic,” “marriage,” “friend/ship” and “family” using the Communication & Mass Media Complete, Academic Search Premier, and APA PsycInfo online academic databases. Within these results, we focused our search on research published in major journals in communication, family studies, and social psychology, as these represent our disciplines, as well as the disciplines of most researchers who are currently and traditionally publishing in JSPR.

Initial results were scanned for peer-reviewed, published research studies and significant conceptual articles (including online first and registered preprints) that focused on the criteria set out in this review. Conference papers and non-peer-reviewed papers were excluded. As major topic themes emerged, they were added to later searches (e.g., “conflict and COVID-19 and romantic”). Online database searches took place approximately once per month from July 5, 2021, until September 27, 2021. Ultimately, we reviewed 82 articles (see Table 1, listing information about all article authors, and, when available, information on key sample characteristics: what nation[s] participants were drawn from, racial/ethnic representation, sexual orientation, gender identity, and socioeconomic status [SES]). In addition, basic study methodology (e.g., online, dyadic, longitudinal, etc.) and how COVID-19 factored in (directly measured and/or specific context for the research conducted) are listed in Table 1.

We note (and caution) that, though we sought to be comprehensive in our searches, the constant stream (a torrent, really) of new COVID-19 research means that we were very likely unable to be complete in the personal relationship scholarship that we review here. What we intend to accomplish instead is to depict the research on COVID-19 and relationships in a way that represents both the breadth and depth of this emerging research
| Article Authors | Countries sampled from | Racial makeup of sample | Sexual orientation of sample | Gender identity of sample | Socio-economic status of sample | Methodology used | How was “COVID-19” measured? |
|-----------------|------------------------|-------------------------|-----------------------------|--------------------------|-------------------------------|----------------|-------------------------------|
| Aguiar et al., 2021 | Portugal | Portuguese | Not measured | 68.3% mothers | Equivalent SES across both groups but specifics not reported | Online survey before pandemic and after pandemic with a new group of parents | Context for research |
| Balzarini, Muise, Zoppolat, Di Bartolomeo et al., 2022 | 57 countries | Not measured | 82% heterosexual, 13.2% bisexual, 4.3% gay/lesbian | 77.6% women | Not measured | Online survey | Context for research, financial concern due to COVID-19 |
| Balzarini, Muise, Zoppolat, Gesselman et al., 2022 | “Multinational,” including U.S., Canada, the Netherlands | Not measured | 59.4% heterosexual, 19% bisexual, 5.5% lesbian/gay, 16.1% other | 69.9% women | Not measured | Completed 3 follow-up surveys every 2 weeks for 6 weeks | Context for research, financial concern due to COVID-19, COVID-19-related worry |
| Bond, 2021 | U.S. | 81% White | Not measured | 61% female (n = 101), 39% male (n = 65) | Not measured | Longitudinal survey (4 data collection periods) | Context for data collection |
| Broatto et al., 2021 | Canada | 69.7% White, 29.3% “person of color” | 52.3% heterosexual, 12.7% gay/lesbian, 33.4% other, 1.7% prefer not to say | 28.9% man, 63.5% woman, 7.3% non-binary | 16.8% less than 20K, 44.3% 20K–80K, 33.7% above 80K | Completed online surveys every 4 weeks for 4 collection periods | COVID-19-related stress |

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| Article Authors          | Countries sampled from | Racial makeup of sample | Sexual orientation of sample | Gender identity of sample | Socio-economic status of sample | Methodology used                                                                 | How was “COVID-19” measured? |
|-------------------------|------------------------|-------------------------|------------------------------|--------------------------|--------------------------------|--------------------------------------------------------------------------------|--------------------------------|
| Bulow et al., 2021      | Netherlands            | Not measured            | Not measured                 | 69% of children were female, 81% of parents were female | Not measured                     | 4 biweekly surveys before and 4 biweekly surveys after the pandemic (16 weeks); mostly dyadic parent-child data | COVID-19 related rules, parental anxiety/worry about COVID-19, and context for research |
| Burleson et al., 2022   | U.S.                   | 74.5% White, 10.8% Black | Primarily heterosexual      | 50.3% female             | 51.8% reported annual household income over 60K | Online survey                                                                 | Physical distancing, COVID-19 worry, context for research |
| Calarco et al., 2020    | U.S.                   | Mostly White            | Mostly different-sex relationships | All women intentionally recruited through social networks and parenting study program | Most had sufficient funds for bills and were not receiving government support | Longitudinal mixed methods including surveys, diary entries, and in-depth interviews | “Pandemic parenting study” focuses on COVID-19 as context for research |
| Cannon et al., 2021     | U.S.                   | 86.1% White             | Not measured                 | 76.4% women, 25.4% men  | 22.9% had stress related to nutrition access, 33.6% had mortgage/rent stress, 63.9% owned their home | Online survey                                                                 | Current situation as it related to COVID-19, context for research |

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| Article Authors                  | Countries sampled from | Racial makeup of sample | Sexual orientation of sample | Gender identity of sample | Socio-economic status of sample | Methodology used                                      | How was “COVID-19” measured?                                                                 |
|---------------------------------|------------------------|-------------------------|------------------------------|----------------------------|--------------------------------|------------------------------------------------------|---------------------------------------------------------------------------------------------------|
| Carpenter & Spottswood, 2021    | U.S.                   | Not measured            | Mostly different-sex relations | 229 female, 88 male       | Not measured                   | Online survey                                        | Context for research                                                                                |
| Choi & Choung, 2021             | U.S.                   | 76.4% White, 12.1% Asian| Not measured                 | 52.2% female              | Not measured                   | Online survey                                        | Context for research                                                                                |
| Cohodes et al., 2021            | U.S.                   | 74% White, 13% Asian    | Not measured                 | 54% male, 46% female       | Not measured                   | Online survey                                        | Epidemic-pandemic impact inventory, context for research                                           |
| Cui & Hong, 2021                | China                  | Not measured, but from six universities across China | Not measured                  | 30.8% men, 69.2% women     | (in yuan) 4.8% below 30K, 17.4% 30–80K, 33.3% 80–150K, 28.2% 150–350K, 14.2% 350–800K, 2.1% over 800K | Online survey                                      | Income loss due to COVID-19, context for research                                                  |
| Curran & Seiter, 2021           | U.S.                   | White (n = 320), Black (n = 76), Asian (n = 32), LatinX (n = 19) | Not measured                  | 60.9% male                 | Not measured                   | Online survey                                        | Relational worry due to COVID-19, adherence to CDC guidelines for COVID-19                          |

(continued)
| Article Authors                | Countries sampled from | Racial makeup of sample | Sexual orientation of sample | Gender identity of sample | Socio-economic status of sample | Methodology used                                                                 | How was “COVID-19” measured?                      |
|-------------------------------|------------------------|-------------------------|------------------------------|--------------------------|-------------------------------|----------------------------------------------------------------------------------|---------------------------------------------------|
| Enestrom & Lydon, 2021        | Canada and U.S.        | 65% White, 9% Asian, 7% African, 6% Oceanic, 5% Indigenous | 6 of 155 couples were different-sex | Female (n = 152), male (n = 157), other (n = 1) | Not measured                  | Dyadic data collection with at least 1 healthcare worker member                  | Population of frontline healthcare workers         |
| Feinberg et al., 2021         | U.S.                   | 94.7% White             | Not measured                  | Mothers (n = 122), fathers (n = 84) | Median income was $112,500    | Some dyads, mostly individuals with pre-pandemic measures completed as dyads and additional responses as individuals after pandemic onset | Context for research                               |
| Fish et al., 2020             | U.S.                   | Not measured            | All LGBTQ+ youth             | Not measured              | Not measured                  | Coded chat-based online support groups                                            | Context for research                               |
| Fleming & Franzese, 2021      | U.S.                   | 89.8% White             | 3.7% same-sex orientation, 12.3% bisexual orientation, 84% heterosexual | 84.5% female              | Not measured                  | Online survey                                                                    | Context for research                               |
| Ford, 2020                    | U.S.                   | 40% White, 13% Asian, 12% multiracial | Not measured                  | Males (n = 62), females (n = 165), transgender (n = 1) | Not measured                  | Completed a set of 3 diaries at the end of each day for 3 days                   | Social distancing, context for research            |

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| Article Authors | Countries sampled from | Racial makeup of sample | Sexual orientation of sample | Gender identity of sample | Socio-economic status of sample | Methodology used How was "COVID-19" measured? |
|-----------------|------------------------|-------------------------|----------------------------|--------------------------|-------------------------------|-----------------------------------------|
| Fried et al., 2021 | Netherlands | 19 nationalities with Dutch (n = 36), German (n = 16), Finnish (n = 7) being the largest proportion of ps | Not measured | Female (n = 60), male (n = 19), “other” (n = 1) | Not measured | Pre-test, ecological momentary assessments 4 times per day for 2 weeks, and post-test |
| | Portugal, U.K., Italy, Brazil, Chile, Sweden | Not measured aside from being in one of the listed countries | 52.1% gay/lesbian, 32.2% bisexual, 5% pansexual, 1.8% asexual, 8.8% other | 81.4% cisgender, 6.2% transgender, 11.2% non-binary, 1.2% other | Not measured | Online survey Psychological effects of COVID-19 |
| Goldbach et al., 2021 | U.S. | 83.2% White | 41.8% queer, 26.4% bisexual | 49.1% cisgender, 50.9% transgender or non-binary | Not measured | Online survey Pandemic concerns scale |

(continued)
| Article Authors       | Countries sampled from | Racial makeup of sample | Sexual orientation of sample | Gender identity of sample | Socio-economic status of sample | Methodology used               | How was “COVID-19” measured? | Context for research |
|----------------------|------------------------|-------------------------|------------------------------|----------------------------|--------------------------------|--------------------------------|-------------------------------|----------------------|
| Gonzalez et al., 2021| U.S.                   | 79.1% White             | 25.5% bisexual, 24% lesbian, 20.9% queer, 17.9% gay, 9.3% pansexual, 2.4% other | Cisgender woman 51.1%, cisgender man 17.8%, non-binary 10%, and representation of transgender, gender nonconforming, agender, nonbinary genderqueer woman, enby with she/her pronouns, genderfluid/female, genderflux, AFAB nonbinary, transmasculine nonbinary, genderqueer, other | 13.2% working class, 20.9% lower-middle class, 37.9% middle class, 17.9% upper middle class, 1.6% upper class | Online open-ended survey | Context for research |
| Goodboy et al., 2021 | U.S. Mostly White (n = 246 of 315), next most common Middle Eastern (n = 31) | Mostly heterosexual, 13 relationships were same-sex | Mostly heterosexual, 13 relationships were same-sex | Men (n = 117), women (n = 119), nonbinary (n = 1) | Not measured | Online survey | Context for research |
| Gresham et al., 2021 | U.S.                   | 88.4% White             | Not measured                  | 79.7% female                | 14.8% under 50K, 38.4% 50–100K, 25.9% 100–150K, 22.4% 150K+ | Online survey | COVID-19 stress, COVID-19 impact |
| Hall & Zygmunt, 2021 | U.S.                   | 87% White               | Not measured                  | 70% female                  | 9% less than 25K, 16% 25–50K, 20% 50–75K, 24% 75–100K, 32% over 100K | Online survey | Context for research |

(continued)
| Article Authors          | Countries sampled from | Racial makeup of sample | Sexual orientation of sample | Gender identity of sample | Socio-economic status of sample | Methodology used                                                                 |
|-------------------------|------------------------|-------------------------|------------------------------|----------------------------|---------------------------------|----------------------------------------------------------------------------------|
| Harth & Mitte, 2020     | Germany                | Not measured            | Not measured                 | 61% female, 36% male       | Not measured                    | Online survey                                                                  |
| Hernandez & Colaner, 2021 | U.S. & 1 P in India   | White (n = 11), LatinX (n = 3), Asian (n = 1), unknown (n = 1) | Not measured                 | Not measured                 | Not measured                    | Semi-structured interviews                                                      |
| Hesse et al., 2021      | U.S.                   | 74.2% White             | Not measured                 | 56.3% male, 43.6% female    | Not measured                    | Longitudinal online survey data with 3 waves of data collection all after pandemic onset |
| Holmberg et al., 2021   | U.S.                   | 78.6% White, 89.9% heterosexual, 9.9% bisexual | 50% women, 47.4% men, 5% non-binary | Not measured                 | 4 online surveys collected for longitudinal design during pandemic              |
| Holmstrom et al., 2021  | U.S.                   | 79.5% White             | Not measured                 | 54.9% female, 44.3% male, .7% non-binary | Not measured                    | Online survey                                                                  |
| Johnson et al., 2021    | U.S.                   | 75.4% White             | Not measured                 | 70.3% female, 29.7% male    | Not measured                    | Online survey                                                                  |

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| Article Authors | Countries sampled from | Racial makeup of sample | Sexual orientation of sample | Gender identity of sample | Socio-economic status of sample | Methodology used | How was “COVID-19” measured? |
|----------------|------------------------|-------------------------|----------------------------|---------------------------|-------------------------------|----------------|-----------------------------|
| Jones & Theiss, 2021 | U.S. | 71.03% White, 11.21% Hispanic, 10.59% Asian | 92.7% opposite sex relationships | 153 females, 148 males | 39.7% less than 60K, 43% 60–120K, and 17.3% over 120K | Romantic dyads completed 4 weekly online surveys from April-June 2020 (longitudinal) | Context for research |
| Jones et al., 2021 | U.S. | 70.9% White, 11.2% Latinx | 92.7% opposite sex relationships, 6.6% same sex, 0.7% other | Not measured | 24.2% under 40K, 31.8% 40–80K, 26.8% 60–120K, 12.9% 120–160K, 4.3% over 160K | Dyadic data narrative responses to open-ended items | Context for research, prompts related to pandemic |
| Juvonen et al., 2021 | U.S. | 81% White | Not measured | 83% women | 20% under 50K, 30% between 50K and 100K, and 45% over 100K | Online survey | COVID-19 diagnosis, stay at home orders, social distancing behaviors, frequency of electronic contact pre- and during pandemic |
| Killgore et al., 2020 | U.S. | Not measured | Not measured | Not measured | Not measured | Online survey | Context for research |
| Knoster et al., 2020 | U.S. | White (n = 111), Middle Eastern (n = 22), Black (n = 17) | Not measured | Men (n = 54), women (n = 108) | Not measured | Online survey | Context for research |
| Article Authors | Countries sampled from | Racial makeup of sample | Sexual orientation of sample | Gender identity of sample | Socio-economic status of sample | Methodology used | How was “COVID-19” measured? |
|----------------|------------------------|-------------------------|----------------------------|--------------------------|-------------------------------|----------------|-----------------------------|
| Larson et al., 2021 | 84 countries represented | Country measured but otherwise not included | Not measured | 88.8% female | Not measured explicitly; however, most Ps owned their home | Online survey | COVID-19 household environment scale |
| Lee et al., 2021 | U.S. | 77% White | Not measured | Not measured | Average household income 50–70K | 3 waves of an online survey | Context for research |
| Lehmiller et al., 2020 | U.S., 6% Canada, 5.7% U.K., 2.4% Australia | 84% White | 52.7% heterosexual, 19.5% bisexual, 7.8% queer, 7.3% pansexual, 7% gay/lesbian | 71.1% female, 23.4% male, 4.5% non-binary | 9.9% less than 20K, 24.8% 20–55K, 28.3% 55–100K, 29% over 100K | Online survey | Context for research |
| Li et al., 2020 | All lived in China, not otherwise reported | All heterosexual | Males (n = 541), females (n = 426) | Fine (23%), general (34%), poor (8%) financial situations | Online survey | Context for research, COVID-19 impact on reproductive health |
| Li & Samp, 2021 | U.S. | 82.73% White | 40.15% gay, 32.6% bisexual, 27.25% lesbian; had to be in a relationship with a same sex partner | Not measured | Not measured | Online survey | Negative impact of pandemic, perceived threat of COVID-19 |

(continued)
| Article Authors          | Countries sampled from | Racial makeup of sample | Sexual orientation of sample | Gender identity of sample | Socio-economic status of sample | Methodology used                                                                 | How was “COVID-19” measured?                                                                 |
|-------------------------|------------------------|-------------------------|-----------------------------|---------------------------|-------------------------------|---------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------|
| Lillie et al., 2021     | U.S.                   | 90% White               | 95% heterosexual            | 51.7% female, 48.3% male  | 29.8% less than 50K, 23.5% 50-75K, 14.6% 75-100K, 32.1% 100K+               | Online survey                                                                    | Context for research                                                                      |
| Losada-Baltar et al., 2021 | Spain                 | 100% Spanish            | Not measured                | 71.1% female              | Not measured                  | Online survey                                                                    | Context for research                                                                      |
| Luetke et al., 2020     | U.S. (nationally representative sample through Knowledge panel) | 66% White, 10% Black, 16% Hispanic | Not measured                | 51% female                 | Not measured                  | Online survey                                                                    | Context for research                                                                      |
| McMillan et al., 2021   | U.S.                   | 83.7% White             | Not measured                | All pregnant women        | Not measured                  | Online survey                                                                    | Context for research                                                                      |
| Merkas et al., 2021     | Croatia                | Croatian                | Not measured                | 90.7% mothers             | Middle to upper class         | Online survey                                                                    | Context for research                                                                      |
| Merolla et al., 2021    | U.S.                   | 46% Asian, 46% White, 18% Latinx | Not measured                | 81% female, 19% male      | Not measured                  | Longitudinal daily online survey for 10 days                                     | COVID-19 anxiety, context for research                                                      |
| Neff et al., 2021       | U.S.                   | 82.2% White             | Primarily heterosexual      | Men (n = 82), women (n = 115), non-binary (n = 3) | Median income was between 40-50K | Longitudinal data with collection at pandemic onset and again 7 months later. Included a background questionnaire and then a 14 day diary. Included 81 couples and 29 individuals | Context for research, source of blame                                                      |
| Article Authors | Countries sampled from | Racial makeup of sample | Sexual orientation of sample | Gender identity of sample | Socio-economic status of sample | Methodology used | How was “COVID-19” measured? |
|-----------------|------------------------|-------------------------|----------------------------|--------------------------|--------------------------------|-----------------|-----------------------------|
| Newson et al., 2021 | 115 countries but mostly (in order): U.K, Turkey, Peru, U.S., France, Bangladesh, Germany, Sweden, Australia, Italy, Canada, Colombia, Spain | From one of the listed countries but otherwise not included | Not measured | Only cisgender, others excluded | Not measured | Online survey | Stringency of lockdown measures, context for research |
| Nguyen et al., 2021 | U.S. | 67.2% White, 14.1% Hispanic, 11.7% African American | Not measured | 54.7% female | 59,462K mean household income | Online survey | Context for research |
| Nuru & Bruess, 2021 | U.S. | 67.59% White, 20.37% Black | LGBTQ+ 25.93%, heterosexual 74.07% | Not measured | 52.63% 100–250K, 31.58% 50–100K | Semi-structured open-ended dyadic interviews over 5 months via video conference; “key Moments timeline” pre-interview | Context for research |
| Ogan et al., 2021 | U.S. | 82.1% White | All different-sex relationships | Not measured | Not measured | Dyadic data collected across three pandemic waves | Pandemic concerns scale, context for research |
| Article Authors | Countries sampled from | Racial makeup of sample | Sexual orientation of sample | Gender identity of sample | Socio-economic status of sample | Methodology used | How was “COVID-19” measured? | Context for research |
|-----------------|------------------------|-------------------------|-----------------------------|--------------------------|-------------------------------|-----------------|-----------------------------|-----------------------|
| Overall, Chang, Pietromonaco et al., 2021 | New Zealand | 56% European, 12% non-New Zealand European, 10% Asian | Not measured | Mothers (n = 199), fathers (n = 163) | Range of SES makeup; about 1/3 of the population lost work and/or income during the pandemic | Dyadic longitudinal online surveys with 2 data collections pre-pandemic and 1 after onset | Context for research |
| Panzeri et al., 2020 | Italy | Not measured | 94.4% heterosexual, 4% bisexual, 2% homosexual | 26.6% male, 73.4% female | Not measured | Online survey | Context for research |
| Philpot et al., 2021 | U.S. | 95.2% White | Not measured | 64% female, 36% male | Not measured | Longitudinal data through pre-existing survey database of patients at a Mayo Clinic care site (pre- and during pandemic) | Context for research |
| Randall et al., 2021 | 27 countries | Not reported beyond country of residence | 91% heterosexual | 77.4% female | Not measured | Online survey | Context for research |
| Riggle et al., 2021 | U.S. | 9 African American, 6 Latinx, 3 White | Only lesbian (n = 11), mostly lesbian (n = 3), queer (n = 2), only heterosexual (n = 1), mostly heterosexual/bisexual (n = 1) | All women | Not measured | In-depth interviews | Context for research |
| Article Authors       | Countries sampled from | Racial makeup of sample | Sexual orientation of sample | Gender identity of sample | Socio-economic status of sample | Methodology used                                                                 | How was “COVID-19” measured?                                                                 |
|----------------------|------------------------|-------------------------|-------------------------------|---------------------------|-------------------------------|---------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------|
| Rivers & Sanford, 2020 | U.S.                   | S1: 76.5% White         | Not measured                  | S1: men (N = 168), women (n = 158), self-describe (n = 1) | Not measured                  | Online survey with two samples                                                   | S2: COVID-19 anxiety, context for research for both samples                                |
|                      |                        | S2: 48.9% White, 51.1% Black |                               | S2: men (n = 98), women (n = 81), self-describe (n = 1) |                               |                                                                                 |                                                                                             |
| Rodriguez et al., 2021 | U.S.                   | Not measured            | 93.4% heterosexual           | Not measured               | Not measured                  | Online experiment w/5 conditions; writing tasks and follow-up survey 2 weeks later | Context for research, evaluated impact of COVID-19 on participant lives                  |
| Russell et al., 2021  | U.S.                   | 78.2% White, 12.8% Black | Not measured                  | 49.4% male, 50% female, .6% transgender | 84% moderately to completely have finances to meet needs | Online longitudinal survey of caregivers in April 2020 and 5 weeks later          | Context for research                                                                   |
| Salerno et al., 2021  | U.S.                   | Mostly White            | Mostly heterosexual or bisexual or gay/lesbian (intentionally a split sample of sexual minority and sexual majority young adults) | Mostly cisgender            | Not measured                  | Longitudinal data before and after the onset of the pandemic                    | Context for research                                                                   |
| Article Authors            | Countries sampled from | Racial makeup of sample | Sexual orientation of sample | Gender identity of sample | Socio-economic status of sample | Methodology used     | How was “COVID-19” measured?                                                                 |
|---------------------------|------------------------|-------------------------|------------------------------|---------------------------|-------------------------------|---------------------|---------------------------------------------------------------------------------------------|
| Salvador et al., 2020     | 39 countries represented | N/A                     | N/A                          | N/A                       | N/A                           | Analysis of aggregate data | Confirmed COVID-19 case rate, relational mobility                                          |
| Schokkenbroek et al., 2021| Belgium                | Not measured            | Not measured                 | 76.3% female              | Not measured                  | Online survey         | Context for research, ability to see how pre-pandemic skills impacted during pandemic outcomes |
| Schrooyen et al., 2021    | Belgium                | Not measured            | Not measured                 | 88.2% female              | Not measured                  | Longitudinal study with collection periods pre- and during the pandemic                  |
| Scott & Stafford, 2021    | U.S.                   | Mostly White            | Not measured                 | All women                 | Mostly under 50K pre-pandemic; mostly 25K–100K during pandemic | Online surveys with unique participants pre- and during the pandemic | Context for research                                                                       |
| Shufford et al., 2021     | U.S.                   | 70.6% White, 14.2% African American | 86.4% heterosexual, 7.9% bisexual, 3.6% gay/lesbian | 51.4% women, 48.6% men | Average household income of 60K or less | Online survey | Degree of social distancing, context for research                                               |
| Stamps et al., 2021       | U.S.                   | 100% Black              | Not measured                 | 48% female, 51% male, 1% non-gender conforming | Not measured                  | Online open-ended survey | Context for research                                                                       |

(continued)
| Article Authors         | Countries sampled from | Racial makeup of sample | Sexual orientation of sample | Gender identity of sample | Socio-economic status of sample | Methodology used                                                                 | How was “COVID-19” measured?                                                                 |
|------------------------|------------------------|-------------------------|------------------------------|----------------------------|-------------------------------|---------------------------------------------------------------------------------|------------------------------------------------------------------------------------------|
| Stuart et al., 2021    | Australia              | 75.5% White, 9.7% Asian | Not measured                 | 67.3% female               | Not measured                  | Online survey                                                                  | Isolation behaviors, context for research                                                  |
| Vowels et al., 2021    | Mostly U.K.            | 92% White               | 91% heterosexual             | 52% female, 46% male, 1% other | Not measured                  | Mixed methods-longitudinal online survey collected daily for 1 week with another report weekly for 1 month; semi-structured interviews | Context for research                                                                 |
| Waddell et al., 2021   | New Zealand            | 70% European            | Not measured                 | Not measured               | “Range of income brackets”    | Dyadic longitudinal data measured twice pre-pandemic and once during pandemic   | Context for research to evaluate the use of pre-pandemic skills for pandemic lockdown functioning |
| Walker et al., 2021    | U.S.                   | 84% White               | Not measured                 | All mothers                | Not measured                  | Telephone interviews                                                           | Context for research                                                                      |
| Wang et al., 2021      | U.S.                   | (Child & parent) 44.8% & 46% Black/African American, 35.6% and 38.7% White, 9.8% & 8.5% LatinX | Not measured | (Child & parent) 39.1% & 13% males, 59.9% & 87% females | 62% low income | Parent-child dyads individually completed baseline surveys and daily surveys for 15 days | Context for research                                                                      |
| Article Authors | Countries sampled from | Racial makeup of sample | Sexual orientation of sample | Gender identity of sample | Socio-economic status of sample | Methodology used | How was “COVID-19” measured? |
|-----------------|------------------------|------------------------|-----------------------------|----------------------------|-------------------------------|-----------------|-------------------------------|
| Williamson, 2020 | U.S.                   | 82% White              | 92% different sex relationships | 60% female, 38.5% male, 1.5% other | Average household income was 50–60K | Longitudinal online survey with data collection once pre-pandemic and twice during pandemic | Negative pandemic experiences, context for research |
| Worley & Mucci-Ferris, 2021 | U.S.                   | 55.3% White, 14.4% Asian, 12.5% Black, 11.4% Hispanic | Not measured | 84.9% female, 15.1% male | 19.8% under 50K, 33.7% 50–100K, 20.2% 100–150K, 15.6% 150K+ | Online survey | Context for research |
| Woznicki et al., 2020 | U.S.                   | 45.9% White, 16.4% Asian, 14.2% multiracial, 12.6% Asian | 54.6% bisexual, 23% gay/lesbian, 15.8% multiple groups, 4.4% pansexual, 2.2% queer | 89.1% cisgender, 6% nonbinary, 3.8% transgender | Not measured | Online survey | Place of residence during COVID-19 |
| Wright & Wachs, 2021 | U.S.                   | 60% White, 26% Latinx, 10% African American | 93% heterosexual, 5% gay/lesbian, 2% bisexual | Females (N = 120), males (N = 119) | Schools were in low to middle class neighborhoods | Longitudinal data pre- and during the pandemic | Context for research, self-isolation during COVID-19 |
| Yang et al., 2021 | U.S.                   | 99% White              | Not measured | Not measured | Not measured | Online survey | Context for research |

(continued)
| Article Authors | Countries sampled from | Racial makeup of sample | Sexual orientation of sample | Gender identity of sample | Socio-economic status of sample | Methodology used | How was “COVID-19” measured? |
|----------------|------------------------|-------------------------|----------------------------|--------------------------|-------------------------------|-----------------|---------------------------|
| Zoppolat et al., 2022 | Netherlands | All lived in the Netherlands | 80% heterosexual, 12.8% bisexual, 5.9% homosexual | 75% women | Not measured | Intake survey; daily diaries for 10 consecutive days | Context for research |
| Zhou et al., 2020 | U.S. | 75% White, 10.71% Black/African American, 6.48% Asian, 9.76% Latino | Not measured | 52.3% female, 47.31% male, 0.39% non-binary | Not measured | Longitudinal surveys with 3 collection periods | COVID impact on financial security, COVID symptoms, and context for research |
area at an important cross-section in time. As we gathered this research, we analyzed and categorized it by major themes. As this is obviously a new research area as of mid-2020, we took an inductive approach and allowed themes to emerge with little to no expectations aside from extremely broad potential concepts such as “technology” or “family” as possibilities.1

**Review and synthesis of the literature**

Six primary themes emerged and were agreed upon by the research team: the first two are the impact of COVID-19 on (1) family and intimate relationships and (2) LGBTQ+ relationships. The third theme is how COVID-19 is linked to (3) technologically mediated communication (TMC) channel usage in personal relationships. The next two themes involve potential shifts in (4) sexual behaviors and desire and (5) in relational conflict and intimate partner violence. The final theme broadly examines (6) constructive aspects of personal relationships, including resilience, relational quality, coping, and social support. When there is overlap between two themes, for example, a study about LGBTQ+ resilience during COVID-19 (e.g., Gonzalez et al., 2021), we were more likely to discuss its findings in greater detail where it was most applicable to one particular theme, though it is at least cited in both sections to be comprehensive.

We use Karney and Bradbury's (1995) vulnerability-stress-adaptation (VSA) model as adapted by Pietromonaco and Overall (2021) to the COVID-19 context to further categorize and understand these themes. This model has been successfully used in multiple COVID-19 and close relationship studies that were ultimately included here (e.g., Fleming & Franzese, 2021; Gresham et al., 2021; Holmberg et al., 2021; Vowels et al., 2021). Using family and relationship theory, this adapted VSA model proposes that (1) external stress (such as COVID-19 and its attendant regulations, change in job status, isolation, etc.); (2) pre-existing contextual vulnerabilities (i.e., age, ethnicity, sexual orientation, etc.) that may contribute added effects to those created by COVID-19; and (3) enduring individual vulnerabilities such as mental health and emotion regulation that are particularly relevant to how individuals interpret and respond to the external stressor interact with one another to impact relationship processes, quality, and stability (Pietromonaco & Overall, 2021). The dyadic relationship processes can be adaptive (support, affection, sharing positive activities) or maladaptive (withdrawal/avoidance, negativity, hostility; Pietromonaco & Overall, 2021).

Although the samples included in the studies here were drawn from around the world, there was still over-representation from Western, educated, industrialized, rich and democratic (WEIRD) populations. Almost 93% of the studies (n = 76) came exclusively from Western populations, with two samples from China, and seven sampled from diverse international populations (see Table 1). These numbers align with prior research in the behavioral sciences in which 80% of participants come from WEIRD populations (https://www.apa.org/monitor/2010/05/weird); this 80% does not refer exclusively to Western versus Non-western countries.

When accounting for other types of diversity, such as race/ethnicity and SES, the percentage of non-WEIRD participants is not far from 80%—although this is difficult to
quantify given that many of the studies here did not comprehensively report demographic information. For example, out of the 82 studies, 50 reported race/ethnicity categories; at least some (but not all) of the lack of information about this stems from the fact that non-North American samples have different ethnic and racial categories from North American racial/ethnic groups, and studies with international samples commonly do not report race and ethnicity. Of those 50 studies that did report race, there were 22 (44%) with greater than 25% non-white representation in their samples. Of those reporting, most reported having fairly high diversity of income/SES. However, there was great variability in how much SES detail was reported in each study. The main issue here seems to be lack of assessment—very few studies (n = 12) comprehensively reported SES statistics that were broken down into more than two income strata. Despite the limitations in the demographic diversity of the research reviewed and/or reported, the following six themes are offered to organize the existing COVID-19 close relationship research to identify gaps that need to be addressed by researchers pursuing this topic area, as well as future directions for individuals who study close relationships in a time of crisis.

**Family and intimate relationships**

As of this writing, the largest body of COVID-19 and close relationship research has focused on potential disruptions of multiple aspects of family and intimate relational dynamics. Here, we broadly define family as including parent-child and romantic/intimate relationships (i.e., both families of origin and families of choice; e.g., Thomeer et al., 2020) and consider each separately below. As such, this expansive research theme represents an example of how related close relationship types were uniquely impacted by the pandemic.

We note that, though multigenerational homes are estimated to make up about 18% of American households (with 27% estimated when considering all multigenerational households of color) and these households are at higher risk for COVID-19 (Center for Public Integrity, 2021), no empirical research identified in our searches examined how COVID-19 impacted households with more than two generations living within in terms of personal relationship functioning. Additionally, though Prime et al. (2020) noted that sibling relationships may suffer during the pandemic due to a spillover effect from other family relationships’ deterioration, our review did not find research on sibling relationship quality during COVID-19. These are critical gaps that should be addressed by researchers to gain a more comprehensive understanding of how the pandemic and other long-term crises may impact family relationships.

**Parent-child relationships.** Parent-child relationships were particularly at risk during the COVID-19 pandemic. During stay-at-home mandates, many parents with younger children had to pivot to at-home learning and/or manage lack of childcare while adjusting to changes in the work force that resulted in many people working from home or dealing with loss of employment/income (e.g., Kochhar, 2020). Many parents with older children (i.e., college-aged and over) saw them return home for an extended period of time in record numbers (e.g., Fry et al., 2020). Some children may have had to care for parents...
who contracted COVID-19 or faced additional difficulties as existent caregivers when nursing homes, hospitals, and other healthcare facilities closed or added strict pandemic regulations (e.g., Larson et al., 2021). This is all in addition to the COVID-19 social distancing, lockdowns, and travel restrictions that prevented the types of visits, ceremonies, celebrations, and rituals that normally keep family ties strong.

Accordingly, a wealth of research on parent-child relationships during COVID-19 emerged early on, including an examination of identity and autonomy roles, individual mental health and relational well-being, the perspectives of new mothers, how adult children related to their parents, and overall family functioning. First, in examining the roles of identity and autonomy, Bülow et al. (2021) found that parental support of adolescent autonomy in a Dutch sample decreased for both parents and children immediately after the first pandemic lockdown. However, the perceived legitimacy of these rules – due to the circumstances – likely mitigated the impact of this reduced autonomy support on parental warmth, conflict, and behavioral control (Bülow et al., 2021). For U.S. college student children returning to their parents’ homes due to the pandemic, negative relationship quality with their parents was characterized by experiencing low autonomy and feeling less like an adult (i.e., an aspect of identity; Hall & Zygmunt, 2021). Conversely, having a clear parental identity (i.e., a coherent commitment to one’s parenting role) as well as greater autonomy was related to the ability to adapt better as a parent to COVID-19, as well as having more positive parental experiences and fewer negative parental experiences (Schrooyen et al., 2021).

Second, understanding how parental mental health influenced relational outcomes for both romantic partners/coparents and children offers more nuanced insights into how individuals coped during COVID-19, as well as reflecting the adapted VSA model’s proposed link between enduring individual vulnerabilities, such as emotional health, and relationship stability (Pietromonaco & Overall, 2021). For example, conflict about coparenting was positively related to parent’s reports of depression and worry and was negatively linked to parent’s relationship quality during adjustment to the pandemic (Feinberg et al., 2021). Parents not classified as clinically depressed during the first 7 weeks of the pandemic had closer relationships with their children in that period than did clinically depressed parents (Russell et al., 2021). Parental burnout increased from 2018 to during the lockdown, with mothers reporting higher levels of burnout than fathers in a Portuguese study (Aguiar et al., 2021).

These mental health findings are not inconsequential, as parents who experienced higher levels of stress and anxiety were less capable of buffering against their children’s own stress (Cohodes et al., 2021). Furthermore, stress could have implications for family safety, as higher distress was related to more time spent with family members with whom individuals did not co-reside in a Spanish sample of over 1300 respondents (Losada-Baltar et al., 2021), potentially indicating non-compliance with COVID-19 protocols as a high stress coping mechanism. Understanding the impact of external stressors like the pandemic on parent-child relational functioning is crucial to develop more effective support for parents in this and future crises.

Stress was also particularly salient for new mothers who were managing their pregnancies or recent births during COVID-19. In a small-scale study of first-time
expectant mothers who were in a relationship with their child’s father, experiencing COVID-19-related stressors such as alcohol use and intimate partner violence (IPV) negatively impacted their pregnancy experiences (McMillan et al., 2021). Namely, these stressors exacerbated negative effects on mental health, relationship conflict, and stress related to prenatal care for these first-time mothers (McMillan et al., 2021).

Another study followed mothers from pregnancy (pre-pandemic) to 2 years post-partum (during the pandemic; Calarco et al., 2020). They found that 39% of mothers were more frustrated with their partner during lockdown than before, especially employed mothers who lacked childcare options. Mothers whose partners were not taking appropriate steps to reduce COVID-19 risk also were more frustrated, even if those partners were supportive of the steps the mothers were taking to reduce risk (Calarco et al., 2020). It is important to distinguish between family types (i.e., new mothers vs. mothers with older children) in order to address the contextual factors that may exacerbate the impact of external stressors like the pandemic on family functioning.

Adding to the complexity of parent-child relationships during COVID-19, a fourth subset of research evaluated adult children and their relationships with their parents. Though some adult children experienced sudden and prolonged physical proximity to family members, others found themselves maintaining a distance that they did not want and did not know when or how would end. Uncertainty accordingly emerged as an important COVID-19-related aspect of the relationship between parents and adult children. For example, Hernandez and Colaner (2021) conducted a qualitative study of adult children managing uncertainty when communicating with their parents about COVID-19. Three salient themes emerged, including (1) navigating uncertainties about COVID-19 risks and protections, (2) managing uncertainty around media and politics, and (3) accepting time-related uncertainties. Coping strategies included seeking information, avoidance, acceptance, and uncertainty management (Hernandez & Colaner, 2021).

Walker et al. (2021) also identified sources of COVID-19-related uncertainty in interviews with 25 mothers about interactions with their adolescent and young adult children (ages 15–26), which included the threat of COVID-19, adjustment, social interaction, and COVID-19 information. Although COVID-19 prevention behaviors such as isolation and social distancing aided in managing these uncertainties, mothers also reported causing additional uncertainties themselves (Walker et al., 2021). Though these two studies considered either parent or adult child perspectives, it is interesting to see the overlapping themes of information and threat emerging across both. This also highlights the fact that enduring an individual vulnerability (e.g., uncertainty) can emerge for both relational partners from unprecedented external stressors like a pandemic (Pietromonaco & Overall, 2021) and should be explored during research on future, unfamiliar long-term crises.

Adult children also experienced turbulence and conflict when communicating with their parents during the pandemic. In one specific, but common, context, family caregiving households reported more conflict related to social distancing in mid-to late-2020 than non-caregiving households in an 84-country sample (Larson et al., 2021). In addition, in a sample of American college students who had moved home due to COVID-19,
relational turbulence with their parents was associated with students’ stress, depression, and anxiety (Worley & Mucci-Ferris, 2021). This relational turbulence was also inversely related to perceived support received and support sought from parents (Worley & Mucci-Ferris, 2021).

Family Communication Patterns Theory (FCPT; Fitzpatrick & Ritchie, 1994) also provided an insightful framework for understanding how adult children engaged in conversations with their family members about social distancing. Greater levels of family conversation orientation were linked to a higher positive predicted outcome value regarding future interactions with a family member, greater relational closeness, and less relational harm after arguing with that family member about social distancing (Johnson et al., 2021). Family conformity orientation was only associated with greater relational harm following such an argument (Johnson et al., 2021). Finally, protective families (high conformity orientation, low conversation orientation) encountered a series of particularly destructive outcomes compared to the other FCPT family types, including perceptions of more negative future interactions, the most negative effect on relational closeness, and the highest post-argument relational harm (Johnson et al., 2021).

Despite the challenges experienced during the pandemic, there were some encouraging findings related to family functioning behaviors that could be used to improve individual health outcomes. Engaging in emotional coaching (e.g., assisting in identifying emotions) with children and maintaining relatively stable home routines during the pandemic were helpful parental strategies in buffering against child stress (Cohodes et al., 2021). Further, Croatian parents’ emotional stability buffered the negative effects that being distracted by technology had on their children’s social competence during pandemic lockdown (Merkaš et al., 2021). And saturation, a facet of parental burnout defined as not enjoying spending time with their children, decreased from 2018 to the 2020 lockdown for Portuguese parents (Aguiar et al., 2021). These findings highlight opportunities that researchers have to improve family functioning by offering strategies for parents to manage their stress and enhance overall family health and well-being outcomes.

Different-sex intimate relationships. Intimate relational partners (cohabiting and married) are a primary source of support for many individuals during COVID-19 (e.g., Balzarini, Muise, Zoppolat, Di Bartolomeo et al., 2022) and are a fruitful area for research in understanding the experience of individuals trying to cope with the realities of the pandemic. This was explored from a global perspective, including a Belgian study of almost 3000 participants that found women were more stressed than men during early lockdown stages due to increased conflict and divergent romantic relationship attitudes (Schokkenbroek et al., 2021). Further, both men and women felt more stress after lockdown compared to before due to feeling restricted in their relationships (Schokkenbroek et al., 2021).

In another study spanning 57 countries and almost 3600 participants, COVID-related stressors, such as social isolation or financial strain, were associated with less romantic relationship satisfaction and commitment, as well as more romantic partner conflict at the onset of the pandemic (Balzarini, Muise, Zoppolat, Di Bartolomeo et al., 2022). More COVID-related stress was also associated with lower relationship satisfaction and
increased conflict, but not related to relationship commitment (Balzarini, Muise, Zoppolat, Di Bartolomeo et al., 2022). These COVID-related stressor effects were detrimental to relationship quality over time. However, in most cases, having a highly responsive romantic partner (i.e., believing one’s partner cares about, validates, and understands them) buffered against or completely attenuated most of these negative associations (Balzarini, Muise, Zoppolat, Di Bartolomeo et al., 2022). In essence, effective relational maintenance and communication strategies are critical to couples responding positively amidst a crisis like COVID-19 to bolster individual and relational well-being.

COVID-19 impacted many facets of individual life, from day-to-day relationship functioning to disrupting significant family rituals such as weddings and births due to the necessary social distancing policies enacted to slow the spread of COVID-19. From a relational perspective, these shifts in rituals created disillusionment by those affected and shaped the way couples navigated life during COVID-19. For example, among engaged women, wedding financial strain was positively related to depression among COVID-19 engaged participants and depression levels of engaged women before the pandemic were significantly lower than those who were engaged during the pandemic (Scott & Stafford, 2021). Scott and Stafford (2021) also identified positive links between depression, anxiety, and wedding financial strain and wedding disillusionment as well as negative relationships between depression, relationship satisfaction, and wedding satisfaction. Decreased wedding satisfaction was also related to higher anxiety during COVID-19 (Scott & Stafford, 2021), creating more severe individual health outcomes.

In addition to changes in family rituals during COVID-19, affection (or lack thereof) between romantic partners also shifted among different-sex intimate partners. Adherence to social distancing guidelines was associated with better relationship quality, which was also linked with more affectionate touch, greater use of touch for affection regulation, and decreased psychological distress (Burleson et al., 2022). However, whether romantic partners cohabited emerged as a moderator for the association between guideline adherence and amount of affectionate touch: those who cohabited reported that greater adherence to distancing guidelines was associated with less affectionate touch, whereas, for those who were not cohabiting, the opposite was the case (Burleson et al., 2022). Floyd’s (2006) Affection Exchange Theory also offers insight into affection during the pandemic, with individuals experiencing affection deprivation across relationships during COVID-19’s early stages (Hesse et al., 2021). That deprivation was also related to increased stress, loneliness, and depression over a 6-week period, but unrelated to life satisfaction or happiness (Hesse et al., 2021). These findings highlight the critical roles that physical distance and touch play in relationships, as well as the interplay between adaptive relationship processes such as affection and warmth and external COVID-19-related stressors as proposed by the adapted VSA model (Pietromonaco & Overall, 2021), particularly during a crisis that frequently requires physical distancing from others.

In addition to affection, household role and balance shifts between partners during COVID-19 was also a salient, third topic of research. In a study of over 2200 German participants, mothers were more fatigued than fathers and women experienced more role conflict than men (Harth & Mitte, 2020). Further, parents – regardless of gender – experienced greater fatigue than
non-parents (Harth & Mitte, 2020). These findings generally align with those of Waddell et al. (2021), who examined gendered division of labor and perceptions of fairness in 157 New Zealand heterosexual couples with young children during lockdown. They determined that both partners agreed that the women were doing more of the housework, but the women indicated that they were doing significantly more than their husbands acknowledged. Conversely, spouses agreed that men had more personal time than women did, but wives stated that their husbands had significantly more free time than men reported having (Waddell et al., 2021). Both men and women perceived unfairness in the relationship: it was unfair how much parenting and housework women did, and it was unfair how much paid work men did (Waddell et al., 2021).

Perception of perceived fairness, rather than actual division of labor, was a key predictor in relationship satisfaction and frequency of relationship problems. Namely, wives’ perceptions of fairness were related to their relationship satisfaction and frequency of relationship problems, while fairness was unrelated to relationship outcomes for husbands (Waddell et al., 2021). These findings highlight the existing gender roles and the exacerbated influence they play when families are forced to adapt to long-term crisis situations like a pandemic. Navigating role conflict and having clear communication to enhance perceived fairness is crucial to more effective relational maintenance, particularly when external stressors like the pandemic could heighten existing relational strain (Pietromonaco & Overall, 2021).

As a fourth and final different-sex intimate partner theme, one theory that has already heavily informed research on how romantic relationships fared during COVID-19 was relational turbulence theory (RTT; Solomon et al., 2016). As RTT describes and predicts how relational partners cognitively, emotionally, and communicatively manage periods of often relational chaotic (i.e., turbulent) transitions, it has shown to be a useful framework for COVID-19. Namely, relational turbulence was correlated with depression and anxiety in women who were engaged after COVID-19 (Scott & Stafford, 2021). Spousal interference (i.e., when marital partners prevent one another from achieving personal goals) also predicted relational turbulence indirectly (as well as directly) through the emotions of both sadness and anger experienced during COVID-19 (Knoster et al., 2020). Goodboy et al.’s (2021) study of college student romantic relationships echo these findings, as fear, anger, and sadness during the pandemic were correlated with partner interference (positively) and partner facilitation (negatively). In addition, both partner interference and facilitation decreased during COVID-19 as romantic partners became less interdependent, whereas relational turbulence increased (Goodboy et al., 2021).

Notably, Jones and Theiss (2021) conducted a longitudinal, dyadic test of RTT on romantic partners during the early stages of COVID-19. Supporting RTT, turbulence was successfully predicted by relational uncertainty, partner facilitation, and partner interference, and then turbulence subsequently was linked to irritation severity, aggressive communication, and communication openness, as predicted (Jones & Theiss, 2021). Together, this set of findings examining different-sex romantic partners – coupled with Worley and Mucci-Ferris’s (2021) RTT research examining parents and adult children adjusting to living together again – offers continuing evidence for Solomon et al.’s (2016) RTT, this time in the COVID-19 context.

Overall, the body of research conducted thus far on COVID-19 and family and different-sex romantic relationships examines a variety of concepts, including identity,
autonomy, new motherhood, mental health/well-being, uncertainty, turbulence and conflict, affection, shifts in household roles and duties, and family communication patterns, but – as we noted earlier – is fairly limited in the specific types of relationships that it examines. At the time of this writing, we see only parent-young child, parent-adult child, and different-sex intimate relationships as the sole focus of scholars examining how families are relationally impacted by the pandemic.

It is encouraging to see the diversity of theoretical frameworks and multiple concepts explored. Further, research examining emotional coaching and emotional stability in parental contexts (Cohodes et al., 2021; Merkaš et al., 2021) may offer potential pathways for interventions that can target specific coping skills and strategies related to managing these enduring individual vulnerabilities (Pietromonaco & Overall, 2021) in future crises. Overall, research related to this theme showcased a wide range of subtopics and offered numerous preliminary ideas for solutions, which we will return to later in the concluding section.

**LGBTQ+ romantic relationships**

LGBTQ+ individuals in the U.S. were particularly challenged during the COVID-19 pandemic: LGB individuals, for example, had higher rates of pre-existing conditions such as asthma, heart disease, and cancer that predisposed them to severe COVID-19 outcomes compared to heterosexual individuals (Heslin & Hall, 2021). The Office of the High Commissioner for Human Rights for the United Nations (2020), also noted multiple areas where LGBTQ+ individuals would be particularly vulnerable during the pandemic, including accessing health services and work and livelihood, stigmatization, discrimination, hate speech, intimate partner violence, and de-prioritization of important health services. Further, in a six-nation (i.e., Portugal, United Kingdom, Italy, Brazil, Chile, Sweden) study of almost 2000 participants (Gato et al., 2021), depression and anxiety levels were higher for LGBTQ+ young adults because of increased isolation from school and non-LGBTQ+ friends as well as a discomfort in their home environment. Based on Pietromonaco and Overall’s (2021) adapted VSA model and the above findings, this theme represents a COVID-19-specific pre-existing contextual vulnerability. Accordingly, being an LGBTQ+ individual during COVID-19 may place them at increased risk of lower relationship functioning, quality, and stability (Pietromonaco & Overall, 2021).

Indeed, a qualitative study by Riggle and colleagues (2021) revealed a host of relationship-relevant themes related to difficulties that U.S. sexual minority women experienced during COVID-19. These included (1) adapting strategies for “coming out” due to physical distancing; (2) the need to create social bubbles with LGBTQ+ friends as a specific means of social support while lowering health risks; (3) feeling generally disconnected with the LGBTQ+ community due to events such as Pride being canceled; (4) dating challenges when forming new relationships; (5) negotiating with romantic partners about pandemic risks, new routines, and safety: and (6) connecting with and distancing from other relational partners such as family members about those same issues (Riggle et al., 2021). In essence, LGBTQ+ individuals have navigated standard pandemic challenges, accompanied by unique health, safety, individual, and relational issues that
accompany their sexual orientation status, consistent with the tenets of Pietromonaco and Overall’s (2021) model. This also highlights the importance of identity-centered work when exploring a new context (e.g., COVID-19) in order to understand the unique challenges that individuals face in an unknown arena. We turn now to research investigating these specific LGBTQ+ matters to further understand how LGBTQ+ identities influence interpersonal relationships and personal health during the COVID-19 pandemic.

First, being confined at home with family members who were unsupportive of their identities were notable issues across several LGBTQ+ COVID-19 studies (Fish et al., 2020; Riggle et al., 2021; Salerno et al., 2021). Psychological distress was greatest and subjective well-being lowest for sexual minority young adults who lived with their parents before and after the onset of COVID-19 compared to those who did not consistently live with their parents during that same time period (Salerno et al., 2021). Losing access to supportive friends, alliances, and safe spaces also emerged as a consistent theme for LGBTQ+ individuals during the pandemic (Fish et al., 2020; Riggle et al., 2021). However, online access to resources and support provided a much-needed outlet, particularly to LGTBQ+ youth (e.g., Fish et al., 2020). Specifically, engaging in parasocial relationships with LGBTQ+ YouTubers may buffer emerging adults who were living with their parents during COVID-19 against greater loneliness related to lower family support (Woznicki et al., 2020). Future research should accordingly explore avenues to expand social support (e.g., via technology mediated communication) to at-risk or vulnerable groups, such as LGBTQ+ individuals, in order to better support them amidst crises that may isolate them from their traditional support networks.

Second, in a study that examined lesbian, gay and bisexual (LGB) romantic relationship dynamics early in the pandemic, Li and Samp (2021) focused on how complaint avoidance (i.e., refraining from sharing complaints with a relational partner) and moving in together during COVID-19 may assist in understanding how same-sex partners communicatively managed their COVID-related relational stress. They found that higher perceived COVID-19 threat predicted greater use of complaint avoidance, which then predicted more depression, anxiety, substance use, and lower satisfaction with the relationship (Li & Samp, 2021). Further, moving in with a same-sex partner during the pandemic predicted more complaint avoidance, higher anxiety and depression, greater likelihood of terminating the relationship, and decreased relational satisfaction (Li & Samp, 2021). Having higher internalized homophobia and being a person of color also exacerbated COVID-19’s negative impact of relational satisfaction in these LGB romantic relationships (Li & Samp, 2021) – a finding in alignment with Pietromonaco and Overall’s (2021) adapted VSA model depicting the influence of pre-existing contextual vulnerabilities on the severity of external stressors associated with COVID-19. These findings led Li and Samp (2021) to conclude that COVID-19 “adversely affects same-sex couples’ relational and personal well-being directly and indirectly through complaint avoidance” (p. 1838) and highlights a fruitful area for future research to serve a population in need of greater support.

Third, although LGBTQ+ individuals face many challenges in crises like the pandemic, one way they can cope is via resilience. Higher resilience in LGBTQ+ individuals decreased the impact of their pandemic concern on their anxiety levels
(Goldbach et al., 2021), and resilience can be strengthened by providing social support and building community (Gonzalez et al., 2021). Specific examples of this relationship-relevant resilience included connecting to community and activism organizations, being creative about maintaining close relationships, prioritizing reaching out to other LGBTQ+ community members, and offering financial and emotional support (Gonzalez et al., 2021).

In sum, research highlights the individual- and systemic-level relational challenges that LGBTQ+ individuals faced during the COVID-19 pandemic. Being confined at home with potentially unsupportive relatives, the loss of support networks, complaint avoidance in romantic relationships, and romantic challenges that are potentially exacerbated by moving in together during the pandemic are COVID-specific issues that many LGBTQ+ individuals navigated that translated to increased burden that they faced. Although building relationship-related resilience and fostering relationship satisfaction can help LGBTQ+ individuals during the pandemic, more LGBTQ+-focused research and outreach is necessary to assist this vulnerable population during the ongoing COVID-19 pandemic and in future long-term crises.

Technology-mediated communication and personal relationships

Beyond the need for serving non-dominant groups through identity-centered research, those studying close relationships and the pandemic and/or crises in general should turn their attention to the use of TMC, our third emergent theme. While TMC can support at-risk groups by providing alternative means of connection in a socially distant world, it can also exacerbate existing digital inequality. As such, although Pietromonaco and Overall (2021) do not discuss communication channels in their adapted VSA model, TMC during COVID-19 could conceivably represent both a pre-existing contextual vulnerability (e.g., not having access) and/or an external stressor (e.g., having to manage new technologies).

Indeed, Nguyen et al.’s (2021) study of over 2000 U.S. adults revealed that being older, Native American, and living in a rural area was linked to lower likelihood of being a frequent internet user, whereas having a higher income increased the likelihood of being a frequent user during COVID-19. Overall, “those with existing social and digital privilege fared better in maintaining or increasing levels of digital communication with friends and family outside the home than did those already disadvantaged” (Nguyen et al., 2021, p. 106717), including younger individuals and those with higher education levels and income. This suggests that, unfortunately, the pandemic exacerbated existing social inequities in relation to access to technology: those with access continued to gain access and those without went further underserved.

Using a sample from 115 countries, Newson et al. (2021) determined that TMC channels were used more than face-to-face (FtF) early in the pandemic. In fact, almost 74% of their participants had not had a FtF interaction in the week prior to the study (Newson et al., 2021). Further, Choi and Choung (2021) revealed that individuals preferred interpersonal forms of media such as texting, phone calls, and video chats to connect versus masspersonal forms such as social media. When comparing overall FtF and TMC usage during COVID-19, only FtF contact positively predicted well-being.
Text messaging, on the other hand, negatively predicted well-being, and video messaging and email were unrelated to well-being (Newson et al., 2021). Yet, use of TMC for social connection during COVID-19 attenuated health anxiety in cases of high isolation (i.e., quarantining) in an Australian sample (Stuart et al., 2021), reflecting the complicated role that TMC plays in modern society. These findings cumulatively show that human beings worldwide still inherently understand the importance of FtF communication, despite the dangers related to COVID-19 transmission from social contact.

Increased technology use—specifically, phone use and social media engagement—appear to have impacted romantic relationships during the pandemic. In two highly powered studies ($N = 3271$), researchers (Zoppolat et al., 2022) found that people who experienced COVID-19 related challenges (i.e., lockdown, reduced FtF interactions, boredom, worry) also reported greater self and partner phone use and time spent on social media. In turn, couples experienced more conflict and less relationship satisfaction. The samples were fairly diverse in terms of sexual orientation, with about 25% LGB participants, and geography (i.e., over 3000 participants from 57 countries for the larger sample). These findings suggest that the increase in screen time during the pandemic may have been a challenge for both heterosexual and LGB couples worldwide; a caveat is that this, along with most other COVID-19 studies, failed to capture those from less industrialized nations who often have much less access to the internet.

In line with Zoppolat et al. (2022), the research examining technology use specifically for social connection during the pandemic did so in relation to COVID-19-related guidelines (a specific external stressor, according to Pietromonaco & Overall’s (2021) adapted VSA model). Interesting indirect and direct links emerged between these sets of variables. Somewhat paradoxically, increased adherence to social distancing guidelines was related to lower usage of technology to connect with others (Ford, 2020). Curran and Seiter (2021) similarly observed an indirect relationship from increased apprehension about using video chat technology to decreased adherence to CDC guidelines via increased worry about maintaining personal relationships. Individuals were also spurred by social media monitoring to violate social distancing guidelines by visiting non-cohabiting romantic partners because of concern about a partner’s fidelity (Carpenter & Spottswood, 2021), highlighting the important role that TMC and interpersonal relationships seem to play in shaping early CDC guideline adherence.

However, TMC usage also frequently mediated the positive relationship between social distancing behaviors and positive affect (Shufford et al., 2021). Engaging in self-isolation during COVID-19 was positively associated with increased technology use for romantic relationship maintenance by U.S. adolescents (Wright & Wachs, 2021). In addition, TMC channels were particularly likely to be used, as compared to FtF, when death rates in one’s area were increasing (Newson et al., 2021). Notably, Newson et al. (2021) obtained death rate data via an independent indicator, as opposed to participant self-report, offering more validity for their findings.

COVID-19 caused a rapid and profound shift to TMC channels, and the above studies are a preliminary attempt to sort out how individuals coped with that change in terms of their personal and relational well-being. The consistent focus of these studies on how
isolation is related to TMC usage is logical, and the inconsistent findings we observed are likely a by-product of the different variables used to assess not only TMC usage, but also degree and type of isolation. However, it is not surprising that, despite the inherent dangers associated with FtF interaction during COVID-19, FtF interaction was still inherently preferred and associated with increased well-being. Lack of FtF interaction made the pandemic that much more challenging for many individuals. But, for some, the pandemic offered a new way to connect with existing relational partners, particularly through the use of sexual behaviors as a means of relational maintenance.

**Sexual behaviors and desire**

Though there are many directions that can be taken when considering how COVID-19 interacts with sexual behaviors, we choose to focus exclusively on research examining how the pandemic impacted sexuality within close relationships. This aligns with classifying sexual behaviors and desire (which we sometimes shorthand as “sex” in this review) as an adaptive dyadic relationship process representing affection or a shared positive activity that could mutually influence and be influenced by both COVID-19-specific external relationship stressors and relationship quality, according to Pietromonaco and Overall’s (2021) adapted VSA model. But, as with most aspects of human behavior, particularly during a crisis such as COVID-19, the link between sex and COVID-19 is not clear-cut.

We first turn to potential sexual frequency and desire changes brought on by the pandemic. In one study of over 1500 Americans in April 2020, average sexual frequency between partners decreased compared to the same year prior (Lehmiller et al., 2020); a finding reiterated in a Chinese sample (Li et al., 2020). But, about the same number of participants said the quality of their sex life decreased as said it stayed the same (both approximately 43%; Lehmiller et al., 2020). These findings were unrelated to biological sex, age, and socioeconomic status, highlighting the multifaceted nature of sexuality.

Twenty-two percent of Chinese participants reported an increase in sexual desire (Li et al., 2020), while Canadian respondents indicated a dyadic decrease in sexual desire from April to August 2020 (Brotto et al., 2021). In contrast, Panzeri et al.’s (2020) study found that most of their Italian participants reported no change in sexual frequency, desire, arousal, or orgasm at the beginning of the COVID-19 pandemic. These findings, which examine sexual behaviors and desire in roughly the first 6 months of COVID-19, cover four countries, and include individuals from numerous different cultural/social identities, seem to suggest a little to no decrease in sexual frequency, with perhaps slightly more of a decrease in sexual desire when the pandemic began. The inconsistency in findings points to a need to better understand the factors that may influence sexuality when under the constraints of extreme external stressors like a pandemic and are a fruitful area for future research.

Some researchers approached this nuance by focusing on the influence of sexual behaviors on relationships during COVID-19. For example, the more romantic partners in a nationally representative U.S. sample engaged in COVID-related conflict, the less they also engaged in a range of partnered sexual behaviors (Luetke et al., 2020). Lehmiller
et al. (2020) found that approximately 20% of participants made a new addition to their sex life (e.g., trying a new position, acting on a sexual fantasy, etc.) since the pandemic’s onset. LGBTQ+, younger individuals, those with higher socioeconomic status, those living alone, and people of color were more likely to make a new addition to their sex lives, and biological sex had no significant impact. Further, participants who made these new sex life additions were more likely to report improvements in their sex lives since COVID-19 began than those who had not (Lehmiller et al., 2020). Together, these findings indicate the importance of identity-centered research when exploring sex in close relationships during a crisis.

Balzarini, Muise, Zoppolat, Gesselman et al. (2022) examined almost 5000 participants from 57 different countries who were in romantic relationships to determine how sexual desire changed over time in response to external stressors and whether external stressors introduced by COVID-19 were risk factors for depressive symptoms, which, in turn, decreased sexual desire. They found that, at the onset of the pandemic, stress decreased sexual desire toward one’s partner, whereas financial concern and worry over COVID increased it, with no significant effects for biological sex (Balzarini, Muise, Zoppolat, Gesselman et al., 2022). When the effects were examined over time, external stressors like worry about COVID and stress were now detrimental to sexual desire. Furthermore, over time, when people reported more COVID-related stressors, like stress and loneliness, they reported lower sexual desire for their partner, in part because these stressors were associated with more depressive symptoms. Further, both concern about finances and COVID-related worry increased sexual desire for a partner, with minimal biological sex effects (Balzarini, Muise, Zoppolat, Gesselman et al., 2022).

Balzarini, Muise, Zoppolat, Gesselmann et al.’s (2022) findings highlight the connective influences of sexual desire, identity factors, and individual health outcomes in building a more comprehensive understanding of how relational partners function in a crisis. However, they are in conflict with Brotto et al. (2021), who found that higher dyadic sexual desire was associated with increased COVID-19 stress in a Canadian sample and that higher COVID-19 stress also was linked to greater sexual coercion, which did not change over time (Brotto et al., 2021). This indicates the presence of potential political/social differences in response to the pandemic that may have changed the way that relational partners interacted in different parts of the world.

Taken together, these findings suggest that the effects of the pandemic on sex is complicated. In isolation, simple examination of sexual desire and frequency during COVID-19 suggests little to no change, with mild decreases in some cases. Inconsistent findings characterize the research that examines COVID-19-related stress and strain in association with sexual desire, which may be attributed to measurement and cultural and/or political/governmental differences, and other moderators. However, a COVID-19 adaptation that seems to be successful – according to one U.S. study – is incorporating new sexual behaviors into one’s repertoire (Lehmiller et al., 2020). Changes and nuances in sexual behaviors and desire in relation to COVID-19 should thus continue to be examined over time.
Relational conflict and intimate partner violence

Another topic to continue monitoring is the increase in relational conflict and IPV in close relationships. In a nationally representative U.S. sample of individuals in romantic relationships, 34% indicated engaging in conflict with their partners about a COVID-19-related topic (Luetke et al., 2020). IPV calls to police stations across the U.S. initially rose by as much as 27% (Boserup et al., 2020) during the pandemic. Further, a small sample of expectant mothers indicated that verbal conflict with their romantic partners increased by over one-third and physical IPV rose 25% during COVID-19’s early stages (McMillan et al., 2021). External stressors such as widespread lockdown restrictions, increased financial strain, lack of alternative housing, and closure of schools and childcare prevented many individuals experiencing IPV from leaving or seeking help (e.g., Evans et al., 2020). As such, conflict and IPV represent maladaptive dyadic relationship processes that connect COVID-19 external stressors and relational quality in the adapted VSA model (Pietromonaco & Overall, 2021).

Relational conflict. Several studies focused on conflict in close relationships during the pandemic. Individuals who engaged in COVID-related conflict with their romantic partners were less likely to hug, kiss, cuddle, or hold hands with their partners (Luetke et al., 2020). Intimate partners who engaged in more disagreements also experienced more days in lockdown, greater alcohol use, and higher anxiety than those who experienced fewer disagreements (Lee et al., 2021). Increased alcohol use was also related to increased verbal conflict and disagreements about COVID-19 (Lee et al., 2021). Number of disagreements with cohabiting romantic partners was positively related to the degree to which COVID-19 was affecting respondents’ lives (Rodriguez et al., 2021). These findings cumulatively support the adapted VSA model’s proposed link between specific external stressors brought on by the pandemic (e.g., days in lockdown, alcohol use) and use of maladaptive relationship processes such as conflict (Pietromonaco & Overall, 2021).

In one study conducted over a 10-day period where college students recorded their daily relational experiences, amount of daily conflict was positively related to COVID-19-related anxiety and inversely related to end-of-day optimism (Merolla et al., 2021). At times when goal conflict with a romantic partner was higher, individuals reported that their goals were impacted by COVID-19 more than when goal conflict was lower (Vowels et al., 2021). Vowels et al. (2021) utilized a mixed-methods design and identified several specific methods for managing conflict during the pandemic, including: respectful communication, talking about it, focusing on emotional needs, focusing on practical solutions, taking a timeout, and avoidance. These conflict management themes can be used to structure future crisis interventions for supporting conflict management among romantic couples amidst a crisis.

Conflict during the pandemic was further related to an array of relationship outcomes, also consistent with the adapted VSA model’s suggested link from maladaptive dyadic relationship processes to relationship quality (and, subsequently, relationship stability; Pietromonaco & Overall, 2021). In a Belgian sample, perceived relationship stress was
higher for women than men during the lockdown due to relationship conflict (Schokkenbroek et al., 2021). For individuals in romantic relationships with higher levels of conflict, relationship satisfaction decreased during COVID-19’s early stages in a nationally representative U.S. sample (Williamson, 2020). This was also the case for number of disagreements, conflict relentlessness, and relationship satisfaction for U.S. cohabiting romantic partners (Rodriguez et al., 2021). Further, higher verbal aggression was related to increased thoughts of leaving one’s romantic relationship in a study examining U.S. cohabiting romantic partners (Fleming & Franzese, 2021).

**Intimate partner violence.** IPV may involve sexual, physical, and/or psychological harm, or being threatened with such harm, between partners in a romantic relationship (Gresham et al., 2021). IPV is also a social determinant of health that was exacerbated by COVID-19, leading to women’s diminished well-being (Green et al., 2021). Individuals experiencing IPV during the pandemic were more likely to have lost income, rent instead of owning a home, and to have experienced nutritional stress (Cannon et al., 2021). These each point to pre-existing contextual vulnerabilities that intensify the influence of external stressors on individual and relational well-being (Pietromonaco & Overall, 2021).

Overall, Chang, Cross et al. (2021) examined hostile and benevolent sexism and aggressive parenting before and during lockdown in New Zealand. Men with more hostile sexist attitudes pre-COVID-19 were more aggressive toward their children and partners during lockdown (Overall, Chang, Cross et al., 2021). Conversely, men with more benevolent sexist attitudes pre-pandemic reported less aggressive parenting, but benevolent sexist women were more aggressive toward their partners during lockdown (Overall, Chang, Cross et al., 2021). Greater life stress and lower parent-child and parental relationship quality were also associated with increased aggression (Overall, Chang, Cross et al., 2021).

IPV and mental health indicators were examined in multiple studies. For example, expectant mothers reported that increases in physical harm predicted more depression, anxiety, and stress (McMillan et al., 2021). Further, COVID-19-related stressors also predicted IPV victimization in a study examining cohabiting romantic partners nearing the end of the initial U.S. lockdowns in late May 2020 (Gresham et al., 2021). These stressors included health and financial anxiety, social disconnection, and the stress and impact of COVID-19. Further, IPV victimization also predicted a greater likelihood of movement outside the house (i.e., leaving to visit others or go to public spaces in the last week) and increased substance use, but was not associated with altered physical and mental health (Gresham et al., 2021). This highlights the interplay between CDC adherence, personal well-being, and enduring individual vulnerabilities that can have a ripple effect on public health behaviors.

Perhaps more so than research in the other themes, these findings offer stark, consistent evidence of how destructive COVID-19-related external stressors (i.e., increased alcohol consumption, financial anxiety, general life stress) were linked with increased conflict and IPV in family and romantic relationships. This specific link between external stressors emerging from the pandemic and these maladaptive relationship processes provide support for Pietromonaco and Overall’s (2021) adapted VSA model. Continuing to
understand these relational patterns of conflict and aggression should thus be of interest to personal relationship researchers to continue to focus on maintaining relationship quality and preserving relationship stability (Pietromonaco & Overall, 2021). Indeed, Rodriguez et al. (2021) evaluated the impact of an expressive writing intervention designed to reduce interpersonal conflict during the pandemic. Results indicated that the condition where participants wrote about a conflict with their romantic partner from an objective third-party perspective (i.e., cognitive reappraisal) was the most successful and resulted in fewer disagreements between partners, less aggression in the relationship, and less relentless conflict (Rodriguez et al., 2021). This area of research is vital for understanding relationships as this pandemic continues and new similar crises may emerge.

**Constructive aspects of personal relationships**

In alignment with the intervention-focused research conducted by Rodriguez et al. (2021), the final theme of our review focuses on studies examining the constructive elements of close relationships during the pandemic. These studies describe how people relied on their close partners during COVID-19 and to what degree personal relationships buffered people against pandemic-related strains and challenges. Pietromonaco and Overall’s (2021) adapted VSA model would consider this theme as containing multiple adaptive dyadic relationship processes.

A number of studies suggest there were more positive than negative relational experiences during the pandemic. For example, positive effects of pandemic lockdown were observed for romantic partners over time, even for those who reported being particularly impacted by the pandemic (Holmberg et al., 2021). Belgian parents also reported more positive than negative family experiences (Schrooyen et al., 2021). Further, using Wellfulness Theory, Nuru and Bruess (2021) identified multiple ways that romantic partners in the U.S. managed well-being during the pandemic, including accepting life on life’s terms (e.g., enjoying the little things and making new rituals), and inviting challenges as opportunities for growth (e.g., recognizing the pandemic as a teacher and appreciating skills gained during the pandemic). Overall, four general areas of research surfaced in relation to this theme: (1) coping, (2) social support, (3) resilience, and (4) general relationship quality, each examined in turn below.

**Coping.** Both coping strategies and the impact of dyadic coping were examined in relation to COVID-19. Jones and Theiss (2021) identified eight specific romantic coping strategies via thematic analysis: (1) seeking escape, particularly for individuals without children; (2) reinforcing intimacy and connection (e.g., date nights), (3) managing routines, (4) engaging social networks (e.g., Zoom game nights), (5) practicing mindfulness, (6) purposeful use of time (e.g., focusing on improving the home), (7) setting boundaries (e.g., need for a break), and (8) planning for the future (e.g., focusing on a post COVID-19 world). Similarly, coping strategies associated with higher self-perceived psychological resilience during the pandemic in a U.S. sample included spending more time outside, daily exercise, family and friend support, sleeping, support from a significant other, and spiritual prayer (Killgore et al., 2020).
In addition to individual-level behaviors that positively impacted individual and relational well-being, Yang et al. (2021) identified reactivating a dormant social tie (i.e., reaching out to a friend or family member one has not spoken to in at least 3 years) as a potential COVID-19 affiliative coping response. Almost 65% of their U.S. sample reactivated a dormant tie from the onset of the pandemic to August 2020, doing so an average of almost five times. Dormant tie reactivation was related to increased job insecurity, but unrelated to stressful family and household ties (Yang et al., 2021), suggesting that it may be an effective way to cope with external stressors but is not necessarily related to adaptive dyadic relationship processes (Pietromonaco & Overall, 2021).

Dyadic coping (i.e., one partner’s stress is related to the coping response of the other partner to that stress) to manage COVID-19 was a successful strategy for maintaining relationship quality, consistent with Pietromonaco and Overall’s (2021) model. For example, dyadic coping was an important safeguard against the increase of romantic disagreements (Lee et al., 2021). It was also positively predicted by resilience communication and fear and negatively predicted by anger in married individuals, using Buzzanell’s (2010) Communication Theory of Resilience (Lillie et al., 2021). Conversely, in a longitudinal romantic dyad study, high COVID-19 related stress also predicted lower perceived dyadic coping from the romantic partner, as well as decreased relationship stability over time (Ogan et al., 2021). These findings demonstrate strong adaptive dyadic relationship processes and the need to attenuate enduring individual vulnerabilities (Pietromonaco & Overall, 2021).

In a large-scale study that spanned 27 countries and over 14,000 participants in cohabiting romantic relationships at least 1 year in length, perceived partner positive dyadic coping was related to increased relationship quality (Randall et al., 2021). The inverse relationship between COVID-19-related psychological distress and relational quality (discussed below) was also attenuated for those who experienced greater positive dyadic coping compared to others in their respective countries (Randall et al., 2021). However, these moderation results were not significant for participants from Bangladesh, Spain, Ghana, Canada, and Chile (Randall et al., 2021), reflecting the importance of understanding cultural, social, and even governmental policy differences when evaluating coping mechanisms in interpersonal relationships and the need for identity-centered research, particularly in novel contexts like a pandemic.

Resilience. According to Killgore et al. (2020), in an April 2020 U.S. sample, resilience, a dynamic process that allow individuals to positively adapt to adverse circumstances, was lower than the typical average during the pandemic and was negatively correlated with anxiety, depression, suicidal ideation, and greater worry about COVID-19. Resilient communication was inversely related to relational uncertainty for married individuals during the first pandemic wave (Lillie et al., 2021). Resilience was also associated with fewer negative parent-child interactions and less anxiety and depression in Chinese students who moved home due to COVID-19 (Cui & Hong, 2021). Rivers and Sanford (2020) accordingly developed the Interpersonal Resilience Inventory and advocated for its use during the pandemic to capture the resiliency aspect, a unique component from other social support measures, that is central to navigating challenges of a long-term crisis.
such as the pandemic. Here, resilience is an adaptive relational process impacted by multiple enduring individual vulnerabilities such as emotional health and uncertainty (Pietromonaco & Overall, 2021).

Two studies specifically examined LGBTQ+ resilience during the pandemic. In the first, Goldbach et al. (2021) found that greater resilience weakened the effect of pandemic concerns on anxiety in a sample of LGBTQ+ Americans. As discussed previously, resilience can secondly be identified in terms of specific themes and strategies employed by LGBTQ+ individuals during COVID-19 (Gonzalez et al., 2021). These findings highlight resilience as a likely buffer for LGBTQ+ populations and offer an opportunity for future research to evaluate resilience as a potential coping strategy for other at-risk groups (e.g., racially underrepresented, non-binary individuals) not only in the current pandemic, but in future public health crises.

Social support. Following natural disasters such as Hurricane Katrina, social support emerged as an important protective buffer against mental health issues (Saltzman et al., 2020). Such social support can promote resilience and posttraumatic growth following disasters and exposure to traumas (Saltzman et al., 2020). Social support, particularly instrumental and emotional support, increased during initial stages of COVID-19 lockdown compared to pre-pandemic levels, when measured in a U.S. sample between February 2018 and May 2020 (Philpot et al., 2021). Black individuals experienced more instrumental social support than white individuals (Philpot et al., 2021). In another study, U.S. college students received more esteem, informational, and tangible support than they desired from their closest relational partners (Holmstrom et al., 2021). Understanding the satisfaction of different groups’ social support needs is fruitful for future research to better serve groups with preexisting contextual vulnerabilities and those managing enduring individual vulnerabilities (Pietromonaco & Overall, 2021).

In addition to individual preferences, enduring individual vulnerabilities such as self uncertainty and adaptive dyadic relationship processes such as parental interference were found to be negatively related to support seeking and perceptions of support received college student-parent relationships when adult children returned home from school due to COVID-19 (Worley & Mucci-Ferris, 2021). Framed by Solomon et al.’s (2016) Relational Turbulence Theory, parent uncertainty and relationship uncertainty did not significantly influence support seeking or perceptions of support received from parents (Worley & Mucci-Ferris, 2021).

In a U.S. sample, social support from family, friends, and a specific loved one were each associated with increased resilience during early lockdown (Killgore et al., 2020). Having less emotional support than desired from one’s closest relational partner predicted decreased relational satisfaction, while more esteem support than desired increased both satisfaction and stress (Holmstrom et al., 2021). Again, this pattern of findings supports the link between social support as an adaptive dyadic relationship process that contributes to increased relationship stability in the face of an external stressor like COVID-19 proposed by Pietromonaco and Overall’s (2021) adapted VSA model.
Relationship quality and stability. Several aspects of relationship quality were examined in studies of COVID-19 and close relationships, particularly in relation to elements of COVID-19-related external stressors, enduring individual vulnerabilities, and adaptive relational processes (Pietromonaco & Overall, 2021). For example, stress and attachment anxiety predicted decreased relationship functioning at pandemic onset (Overall, Chang, Pietromonaco et al., 2021). However, high relationship satisfaction and intention to stay in a relationship were negatively related to financial stress, depressive symptoms, sexual intimacy, and relational power among cohabiting romantic partners (Fleming & Franzese, 2021). Higher relationship quality was related to higher post COVID-19 psychological stress communication in Randall et al.’s (2021) 27-country study, contrary to expectations. According to Neff et al.’s (2021) 14-day diary study, romantic partners who blamed the pandemic instead of themselves or their partners were more effective in managing stress and improving relationship quality. This effect was particularly true for women and did not weaken over time (Neff et al., 2021).

Finally, two specific populations of interest were examined with regard to relationship quality indicators during COVID-19. First, Enestrom and Lydon (2021) studied the influence of shared reality in partner support and relationship satisfaction between frontline healthcare workers and their partners in the U.S. and Canada. When either partner experienced a shared reality, they perceived more partner support, which lead to greater relationship satisfaction for both healthcare workers and their partners (Enestrom & Lydon, 2021). This study offers guidance for exploring future interventions to better support frontline workers amidst a crisis.

Second, Stamps et al. (2021) focused on how Black communities in the U.S. enacted relational maintenance and collectivist strategies during the pandemic. Stamps et al. (2021) observed six themes: (1) reimagining of human connection (e.g., drive-by birthday parties), (2) increased established human communication tactics (e.g., writing letters), (3) adoption of new media literacies (e.g., email prayer requests), (4) monetary, emotional, or task-oriented support (e.g., help running errands), (5) leveraging skills and resources (e.g., meal prep for community members), and (6) institutional support (e.g., volunteering with social justice organizations). Stamps et al.’s (2021) identity-centered approach enhances our understanding of diverse responses to COVID-19 and provides a foundation for more effective support for individuals with preexisting contextual vulnerabilities (Pietromonaco & Overall, 2021).

Review summary and implications for future directions

This descriptive review examines research on personal relationships that has been published or is in press/preprint during the first 2 years (i.e., 2020–2021) of the COVID-19 pandemic in order to identify current patterns as well as guide future research directions for continuing to study this pandemic as well as to understand future crises. We used the components and connections proposed by Pietromonaco and Overall’s (2021) adaptation of the VSA model to the COVID-19 external stressor context to understand the themes and the specific interrelationships revealed by these research studies. Overall, thus far, these studies demonstrate some reason for concern about close relationships early in
the pandemic, which could be mitigated by developing effective coping strategies and evidence-based interventions to minimize COVID-19’s negative impacts of on close relationships.

We note a few overarching patterns across the six themes. First, the research is fairly consistent in finding that mental health indicators related to COVID-19, such as stress, depression, and anxiety, had a destructive impact on how family and intimate relationships functioned during the pandemic’s early stages. Indeed, Pietromonaco and Overall (2021) identified depression as a specific individual vulnerability that could bring on maladaptive interaction processes such as the ones we identified here in relation to parental conflict frequency (Feinberg et al., 2021) and romantic relationship satisfaction (Scott & Stafford, 2021).

Second, increased alcohol consumption and growing financial concern (including job loss) are COVID-19-specific external stressors that, according to the adapted VSA model (Pietromonaco & Overall, 2021), link to adaptive relational processes and/or enduring individual vulnerabilities. This is what we observed across themes here, for example, with increased consumption of alcohol related to a more difficult pregnancy experience (individual vulnerability; McMillan et al., 2021) as well as increased conflict overall and specifically about COVID-19 (maladaptive relational processes; Lee et al., 2021).

Third, relational conflict and IPV not only grew in frequency during the pandemic, but are also related to a host of other destructive relationship aspects. The growth of these negative, hostile relationship processes is consistent with Pietromonaco and Overall’s (2021) adapted VSA model and with Karney and Bradbury’s (1995) original VSA model, which predict that such patterns should be exacerbated when relational partners are faced with an external stressor such as COVID-19. Further, the association between conflict/IPV and external COVID-19-related stressors such as COVID-19-related anxiety (e.g., Merolla et al., 2021) and life stress (Overall, Chang, Pietromonaco et al., 2021) exemplifies the link between maladaptive relationship processes and external stressors. Further, consistent links between conflict and decreased relational satisfaction during COVID-19 demonstrate the interplay between this maladaptive relational process and relationship quality (Pietromonaco & Overall, 2021).

However, there are also silver linings for close relationships during the pandemic evident in the literature that offer tangible opportunities to enhance relational functioning. Engaging in specific relationship processes and addressing relevant individual vulnerabilities, especially those related to the external stressor of COVID-19, can assist with maintaining relationship quality and stability (Pietromonaco & Overall, 2021). First, being a highly responsive partner (Balzarini, Muise, Zoppolat, Di Bartolomeo et al., 2022) could reduce conflict and increase relational quality. Second, engaging in emotional coaching with one’s children buffered against child stress (Cohodes et al., 2021). Third, encouraging open conversation within one’s family (i.e., being a high-conversation-orientation family) reduced relational harm and increased relational closeness after family arguments about social distancing (Johnson et al., 2021). Finally, across studies, dyadic coping, resilient communication, and social support all appear to be particularly helpful relational processes to engage in for family and romantic partners when managing the pandemic’s effects. Taken together, these findings suggest pathways to positive relationship quality
and stability not only during a pandemic, but in preparation for and during other types of crises as well.

Based on this review, we offer three suggestions for future research. First, there is not enough diversity in research samples examining close relationships and COVID to gain a broad enough understanding of how the pandemic affected a wide variety of individuals and their personal relationships. Though we were pleased to report on research from countries with samples ranging from China to Croatia to Belgium, we note that most research in our descriptive review comes from the U.S. and includes samples of majority/exclusively WEIRD participants. This sampling pattern is generally consistent with personal relationship research (e.g., Williamson et al., 2021), yet remains troubling.

The only minority group that appeared to receive concerted special attention with relation to COVID-19 and relationships were LGBTQ+ individuals. Yet, Pietromonaco and Overall (2021) highlighted social class, race/ethnicity, parenting status, and age as pre-existing contextual vulnerabilities that could contribute to poor relationship functioning during COVID-19. Our analysis of the demographics of the samples of the studies that we reviewed (see Table 1) revealed few centering their research on these aspects. More concerning, many studies failed to fully report these demographics. We recognize that collecting data during a pandemic presents its own unique set of challenges. We also acknowledge the difficulties inherent in collecting the few multi-country, large-scale datasets that were included here (Balzarini, Muise, Zoppolat, Di Bartolomeo et al., 2022; Newson et al., 2021; Randall et al., 2021). Yet, as research on COVID-19, or other future crises, and close relationships continues, we encourage more diverse sampling, more detailed demographic reporting and analysis, and the execution of more studies taking an identity-centered approach to understanding relationship functioning.

Second, multiple conceptual pieces published at the onset of the pandemic (e.g., Pietromonaco & Overall, 2021; Prime et al., 2020) suggested that effective communication, dyadic coping, and responsive support would be key adaptive processes for relational partners during the pandemic. Research findings confirmed that each of these processes – individually and collectively – did indeed assist relational partners during COVID-19. However, much of this research was conducted early during the pandemic’s onset. Hopefully, personal relationship researchers are continuing their investigations of COVID-19’s impact on close relationships. The ability to continue to study the long-term effects of COVID-19 on relational processes is one we hope scholars are availing themselves of, despite what we believe to be an escalating case of “COVID-19 research fatigue.” For example, emerging research by Overall et al. (2022) followed participants from March-April 2020 to August-September 2021, observing declines in multiple forms of health and family functioning over that time. But, partner support buffered against these declines (Overall et al., 2022), offering preliminary evidence of similar long-term effects as what we observed here across studies.

The COVID-19 findings have exceptional utility in understanding how relational partners respond to uncertainty-laden contexts and/or in long-term crises. Namely, more public and research attention is being paid to the impact of long COVID; for example, adults with long COVID reported lower personal well-being, including decreased mental health, increased stress and anxiety, greater loneliness, and more personal relationship
strain than those with short COVID or who did not have COVID (Office for National Statistics, 2021). COVID-19 research should continue and be encouraged to support the success of close relationships, and in turn public health, even in an unprecedented global climate.

Third, offering specific, practical solutions for the more disheartening issues that arose from the findings reviewed here should be a research priority. We point to Gonzalez et al.’s (2021) successful implementation of an online expressive writing intervention for decreasing romantic conflict as one example. One specific issue that deserving of attention is determining how to offer resources and safe spaces to LGBTQ+ individuals during COVID-19 and similar future crises, as being restricted at home with unsupportive family members appears particularly damaging. Shifting from theory to practice will ideally allow policymakers and stakeholders to make practical and translatable use of our findings.

The consistent theme of individuals with preexisting contextual vulnerabilities (Pietromonaco & Overall, 2021) points to a need for systemic change. Low-income, racial minority, and underrepresented groups were particularly at-risk during this crisis and should be better served at a systemic level to create long-lasting change. Researchers and policymakers should focus their attention on supporting these underserved groups through effective interventions at the local, institutional, and governmental levels. Relationship researchers are uniquely poised to center these underrepresented identities within a broader discussion to support greater relationship quality and in turn, better individual, dyadic, and societal-level health outcomes.

**Conclusion**

Berger (2014) noted that personal relationships are significantly impacted by societal level phenomena, but much of the research takes place at the individual and interaction level. COVID-19 is an unfortunate example of this paradox in that close relationship research had little to offer in terms of cumulative findings that could assist practically when the pandemic first emerged. Although research focusing exclusively on COVID-19 and personal relationships will naturally wane, we hope that a new research subarea that examines personal relationship processes during risk and crisis events will instead emerge. Future local, national, and/or global crises similar to COVID-19 are not only likely, but probable, and will impact close relationship trajectories (Bevan & Lannutti, 2021). Personal relationship researchers must be at the forefront of these global shifts to assist individuals with protecting the partnerships they depend upon the most.

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Note

1. In this paper, we refer to the terminology that was used in the original studies for demographic descriptors (e.g., biological sex vs. gender).

References

Aguiar, J., Matias, M., Braz, A. C., Cesar, F., Coimbra, S., Gaspar, M. F., & Fontaine, A. M. (2021). Parental burnout and the COVID-19 pandemic: How Portuguese parents experienced lockdown measures. *Family Relations, 70*(4), 927–938. https://doi.org/10.1111/fare.12558

Ankin, L. B., De Neve, E. W., DunnFancourt, D. E., Goldberg, E., Helliwell, J. F., Jones, S. P., Karam, E., Layard, R., Lyubomirsky, S., Saxena, S., Thornton, E. M., VanderWeele, T. J., Whillans, A. V., Zaki, J., Caman, O. K., & Ben Amor, Y. (2022). Mental health during the first year of the COVID-19 pandemic: A review and recommendations for moving forward. *Perspectives on Psychological Science, 17*(4), 915–936. https://doi.org/10.1177/17456916211029964

Baiocchi-Wagner, E. A. (2015). Future directions in communication research: Individual health behaviors and the influence of family communication. *Health Communication, 30*(8), 810–819. http://doi.org/10.1080/10410236.2013.845492

Ball, H., & Wozniak, T. R. (2021). Why do some Americans resist COVID-19 prevention behavior? An analysis of issue importance, message fatigue, and reactance regarding COVID-19 messaging. *Health Communication. Advance online publication. https://doi.org/10.1080/10410236.2021.1920717*

Balzarini, R. N., Muise, A., Zoppolat, G., Di Bartolomeo, A. A., Rodrigues, D. L., Alonso-Ferres, M., Urganci, B., Debrot, A., Pichayayothis, N., Dharma, C., Chi, P., Karremans, J., Schoebi, D., & Slater, R. B. (2022a). Love in the time of COVID: Perceived partner responsiveness buffers people from lower relationship quality associated with COVID-related stressors. *Social Psychological and Personality Science. PsyArXiv. https://doi.org/10.1177/19485506221094437*

Balzarini, R. N., Muise, A., Zoppolat, G., Gesselman, A. N., Lehmiller, J. J., Garcia, J. R., Slater, R. B., & Mark, K. P. (2022b). Sexual desire in the time of COVID-19: How COVID-related
stressors are associated with sexual desire in romantic relationships. PsyArXiv. http://doi.org/10.31234/osf.io/nxkgp

Berger, C. R. (2014). Interpersonal communication: Historical foundations and emerging directions. In C. R. Berger (Ed.), Interpersonal communication (pp. 3–28). De Gruyter Mouton. https://doi.org/10.1515/9783110276794

Bevan, J. L., & Lannutti, P. J. (2021). Introduction to the special issue: Relationships in the time of COVID-19. Journal of Social and Personal Relationships, 38(6), 1753–1758. https://doi.org/10.1177/02654075211018506

Bond, B. J. (2021). Social and parasocial relationships during COVID-19 social distancing. Journal of Social and Personal Relationships, 38(8), 2308–2329. https://doi.org/10.1177/02654075211019129

Boserup, B., McKenney, M., & Elkbuli, A. (2020). Alarming trends in US domestic violence during the COVID-19 pandemic. The American Journal of Emergency Medicine, 38(12), 2753–2755. https://doi.org/10.1016/j.ajem.2020.04

Brotto, L. A., Jabs, F., Brown, N., Milani, S., & Zdaniuk, B. (2021). Impact of COVID-19 related stress on sexual desire and behavior in a Canadian sample. International Journal of Sexual Health, 34(1), 1–16. https://doi.org/10.1080/19317611.2021.1947932

Bulow, A., Keijsers, L., Boele, S., van Roekel, E., & Denissen, J. J. A. (2021). Parenting adolescents in times of a pandemic: Changes in relationship quality, autonomy support, and parental control? Developmental Psychology, 57(10), 1582–1596. https://doi.org/10.31234/osf.io/g8kpf

Burleson, M. H., Roberts, N. A., Munson, A. A., Duncan, A. J., Randall, A. K., Ha, T., Sioni, S., & Mickelson, K. D. (2022). Feeling the absence of touch: Distancing, distress, regulation, and relationships in the context of COVID-19. Journal of Social and Personal Relationships, 39(1), 56–79. https://doi.org/10.1177/02654075211052696

Buzzanell, P. M. (2010). Resilience: Talking, resisting, and imagining new normalcies into being. Journal of Communication, 60(1), 1–14. https://doi.org/10.1111/j.1460-2466.2009.01469.x

Calarco, J. M., Meanwell, E., Anderson, E., & Knopf, A. (2020). My husband thinks I’m crazy”: COVID-19 related conflict in couples with young children. SocArXiv. https://doi.org/10.31235/osf.io/cpkj6

Cannon, C. E. B., Ferreira, R., Buttell, F., & First, J. (2021). COVID-19, intimate partner violence, and communication ecologies. American Behavioral Scientist, 65(7), 992–1013. https://doi.org/10.1177/0002764221992826

Carpenter, C. J., & Spottswood, E. L. (2021). The hyper-perception model: When your partner’s new friends inspire jealousy and failing to use social distancing. Cyberpsychology, Behavior and Social Networking, 24(7), 439–443. http://doi.org/10.1089/cyber.2020.0492

Center for Public Integrity. (2021). Map: COVID put America’s multigenerational homes at higher risk. https://publicintegrity.org/health/coronavirus-and-inequality/map-covid-multigenerational-homes-higher-risk/

Choi, M., & Choung, H. (2021). Mediated communication matters during the COVID-19 pandemic: The use of interpersonal and masspersonal media and psychological well-being. Journal of Social and Personal Relationships, 38(8), 2397–2418. https://doi.org/10.1177/02654075211029378
Cohodes, E. M., McCauley, S., & Gee, D. G. (2021). Parental buffering of stress in the time of COVID-19: Family-level factors may moderate the association between pandemic-related stress and youth symptomatology. Research on Child and Adolescent Psychopathology, 49(7), 935–948. https://doi.org/10.1007/s10802-020-00732-6

Cui, M., & Hong, P. (2021). COVID-19 and mental health of young adult children in China: Economic impact, family dynamics, and resilience. Family Relations, 70(5), 1358–1368. https://doi.org/10.1111/fare.12573

Curran, T., & Seiter, J. S. (2021). The role of relational worry due to COVID-19 in the links between video chat apprehension, loneliness, and adhering to CDC guidelines. Journal of Social and Personal Relationships, 38(6), 1869–1876. https://doi.org/10.1177/0265407520985264

Enestrom, M. C., & Lydon, J. E. (2021). Relationship satisfaction in the time of COVID-19: The role of shared reality in perceiving partner support for frontline healthcare workers. Journal of Social and Personal Relationships, 38(8), 2330–2349. https://doi.org/10.1177/02654075211020127

Evans, M. L., Lindauer, M., & Farrell, M. E. (2020). A pandemic within a pandemic — intimate partner violence during COVID-19. New England Journal of Medicine, 383(24), 2302–2304. https://doi.org/10.1056/NEJMp2024046

Feinberg, M. E., Mogle, J. A., Lee, J. K., Tornello, S. L., Hostetler, M. L., Cifelli, J. A., Bai, S., & Hotez, E. (2021). Impact of the COVID-19 pandemic on parent, child, and family functioning. Family Process, 61(1), 361–374. https://doi.org/10.1111/famp.12649

Fish, J. N., McInroy, L. B., Paceley, M. S., Williams, N. D., Henderson, S., Levine, D. S., & Edsall, R. N. (2020). “I’m kinda stuck at home with unsupportive parents right now”: LGBTQ youths’ experiences with COVID-19 and the importance of online support. Journal of Adolescent Health, 67(3), 450–452. https://doi.org/10.1016/j.jadohealth.2020.06.002

Fitzpatrick, M. A., & Ritchie, L. D. (1994). Communication schemata within the family: Multiple perspectives on family interaction. Human Communication Research, 20(3), 275–301. https://doi-org.ezproxy.lib.ou.edu/10.1111/j.1468-2958.1994.tb00324.x

Fleming, C. J. E., & Franzese, A. T. (2021). Should I stay or should I go? Evaluating intimate relationship outcomes during the 2020 pandemic shutdown. Couple and Family Psychology: Research and Practice, 10(3), 158–167. http://dx.doi.org/10.1037/cfp00000169

Floyd, K. (2006). Communicating affection: Interpersonal behavior and social context. Cambridge University Press. https://doi.org/10.1017/CBO9780511606649

Ford, M. B. (2020). Social distancing during the COVID-19 pandemic as a predictor of daily psychological, social, and health-related outcomes. The Journal of General Psychology, 148(3), 249–271. https://doi.org/10.1080/00221309.2020.1860890

Fried, E. I., Papanikolau, F., & Epskamp, S. (2021). Mental health and social contact during the COVID-19 pandemic: An ecological momentary assessment study. Clinical Psychological Science, 10(2), 340–354. https://doi.org/10.1177/21677026211017839

Fry, R., Passel, J. S., & Cohn, D. (2020). A majority of young adults in the U.S. live with their parents for the first time since the Great Depression. Pew Research Center. https://www.pewresearch.org/fact-tank/2020/09/04/a-majority-of-young-adults-in-the-u-s-live-with-their-parents-for-the-first-time-since-the-great-depression/

Gato, J., Barrientos, J., Tasker, F., Miscioscia, M., Cerqueria-Santos, E., Malmquist, A., Seabra, D., Leal, D., Houghton, M., Poli, M., Gubello, A., Ramos, M. M., Guzman, M., Urzua, A., Ulloa,
F., & Wurm, M. (2021). Psychosocial effects of the COVID-19 pandemic and mental health among LGBTQ+ young adults: A cross-cultural comparison across six nations. *Journal of Homosexuality, 68*(4), 612–630. https://doi.org/10.1080/00918369.2020.1868186

Goldbach, C., Knutson, D., & Milton, D. C. (2021). LGBTQ+ people and COVID-19: The importance of resilience during a pandemic. *Psychology of Sexual Orientation and Gender Diversity, 8*(2), 123–132. http://doi.org/10.1037/sgd0000463

Gonzalez, K. A., Abreu, R. L., Arora, S., Lockett, G. M., & Sostre, J. (2021). Previous resilience has taught me that I can survive anything:” LGBTQ resilience during the COVID-19 pandemic. *Psychology of Sexual Orientation and Gender Diversity, 8*(2), 133–144. http://doi.org/10.1037/sgd0000501

Goodboy, A. K., Dillow, M. R., Knoster, K. C., & Howard, H. A. (2021). Relational turbulence from the COVID-19 pandemic: Within-subjects mediation by romantic partner interdependence. *Journal of Social and Personal Relationships, 38*(6), 1800–1818. https://doi.org/10.1177/02654075211000135

Green, H., Fernandez, R., & MacPhail, C. (2021). The social determinants of health and health outcomes among adults during the COVID-19 pandemic: A systematic review. *Public Health Nursing, 38*(6), 942–952. https://doi.org/10.1111/phin.12959

Gresham, A. M., Peters, B. J., Karantzas, G., Cameron, L. D., & Simpson, J. A. (2021). Examining associations between COVID-19 stressors, intimate partner violence, health, and health behaviors. *Journal of Social and Personal Relationships, 38*(8), 2291–2307. https://doi.org/10.1177/02654075211012098

Hall, S. S., & Zygmunt, E. (2021). Dislocated college students and the pandemic: Back home under extraordinary circumstances. *Family Relations, 70*(3), 689–704. https://doi.org/10.1111/fare.12544

Harth, N. S., & Mitte, K. (2020). Managing multiple roles during the COVID-19 lockdown: Not men or women, but parents as the emotional “loser in the crisis”. *Social Psychological Bulletin, 15*(4), 1–17. https://doi.org/10.32872/spb.4347

Hernandez, R. A., & Colaner, C. (2021). This is not the hill to die on. Even if we literally could die on this hill”: Examining communication ecologies of uncertainty and family communication about COVID-19. *American Behavioral Scientist, 65*(7), 956–975. https://doi.org/10.1177/000276421992840

Heslin, K. C., & Hall, J. E. (2021). Sexual orientation disparities in risk factors for adverse COVID-19-related outcomes, by race/ethnicity—Behavioral risk factor surveillance system, United States, 2017-2019. *Morbidity and Mortality Weekly Report, 70*(5), 149–154. https://doi.org/10.15585/mmwr.mm7005a1

Hesse, C., Mikkelson, A., & Tian, X. (2021). Affection deprivation during the COVID-19 pandemic: A panel study. *Journal of Social and Personal Relationships, 38*(10), 2965–2984. https://doi.org/10.1177/02654075211046587

Holmberg, D., Bell, K. M., & Cadman, K. (2021). Now for the good news: Self-perceived positive effects of the first pandemic wave on romantic relationships outweigh the negative. *Journal of Social and Personal Relationships, 39*(1), 34–55. http://doi.org/10.1177/02654075211050939

Holmstrom, A. J., Shebib, S. J., Boumis, J. K., Allard, A., Mason, A. J., & Lim, J. I. (2021). Support gaps during the COVID-19 pandemic: Sex differences and effects on well-being. *Journal of
Social and Personal Relationships, 38(10), 2985–3009. https://doi.org/10.1177/02654075211041539
Johnson, A. J., Bostwick, E. N., & Morrissey, B. S. (2021). Arguing about social distancing and family relationships. Journal of Social and Personal Relationships, 38(10), 2863–2885. https://doi.org/10.1177/02654075211040798
Jones, H. E., & Theiss, J. A. (2021). Relational turbulence during the COVID-19 pandemic: A longitudinal analysis of the reciprocal effects between relationship characteristics and outcomes of relational turbulence. Journal of Social and Personal Relationships, 38(10), 3033–3058. http://doi.org/10.1177/02654075211044491
Jones, H. E., Yoon, D. B., Theiss, J. A., Austin, J. T., & Lee, L. E. (2021). Assessing the effects of COVID-19 on romantic relationships and the coping strategies partners use to manage the stress of a pandemic. Journal of Family Communication, 21(3), 152–166. https://doi.org/10.1080/15267431.2021.1927040
Juvonen, J., Schacter, H. L., & Lessard, L. M. (2021). Connecting electronically with friends to cope with isolation during COVID-19 pandemic. Journal of Social and Personal Relationships, 38(6), 1782–1799. https://doi.org/10.1177/0265407521998459
Karney, B. R., & Bradbury, T. N. (1995). The longitudinal course of marital quality and stability: A review of theory, methods, and research. Psychological Bulletin, 118(1), 3–34. https://dx.doi.org/10.1037/0033-2909.118.1.3
Katella, K. (2021, March 9). Our pandemic year – A COVID-19 timeline. Yale Medicine. https://www.yalemedicine.org/news/covid-timeline
Killgore, W. D. S., Taylor, E. C., Cloonan, S. A., & Dailey, N. S. (2020). Psychological resilience during the COVID-19 lockdown. Psychiatry Research, 291, 113216. https://doi.org/10.1016/j.psychres.2020.113216.
Knoster, K., Howard, H. A., Goodboy, A. K., & Dillow, M. A. (2020). Spousal interference and relational turbulence during the COVID-19 pandemic. Communication Research Reports, 37(5), 254–262. https://doi.org/10.1080/08824096.2020.1841621
Kochhar, R. (2020). Fewer mothers and fathers in U.S. are working due to COVID-19 downturn; those at work have cut hours. Pew Research Center. https://www.pewresearch.org/fact-tank/2020/10/22/fewer-mothers-and-fathers-in-u-s-are-working-due-to-covid-19-downturn-those-at-work-have-cut-hours/
Larson, M. E., Chavez, J. V., & Behar-Zusman, V. (2021). Family functioning in an international sample of households reporting adult caregiving during the COVID-19 pandemic. Families, Systems, and Health, 39(4), 609–617. https://doi.org/10.1037/fsh0000653
Lee, S. J., Ward, K. P., & Rodriguez, C. M. (2021). Longitudinal analysis of short-term changes in relationship conflict during COVID-19: A risk and resilience perspective. Journal of Interpersonal Violence. PsyArXiv. https://doi.org/10.1177/08862605211006359
Lehmiller, J. J., Garcia, J. R., Gesselman, A. N., & Mark, K. P. (2020). Less sex, but more sexual diversity: Changes in sexual behavior during the COVID-19 Coronavirus pandemic. Leisure Sciences, 43(1–2), 295–304. https://doi.org/10.1080/01490400.2020.1774016
Li, G., Tang, D., Song, B., Wang, C., Qunshan, S., Xu, C., Geng, H., Wu, H., He, X., & Cao, Y. (2020). Impact of the COVID-19 pandemic on partner relationships and sexual and reproductive health: Cross-sectional, online survey study. Journal of Medical Internet Research, 22(8), Article e20961. http://doi.org/10.2196/20961
Li, Y., & Samp, J. A. (2021). The impact of the COVID-19 pandemic on same-sex couples’ conflict avoidance, relationship quality, and mental health. *Journal of Social and Personal Relationships, 38*(6), 1819–1843. [https://doi.org/10.1177/02654075211006199](https://doi.org/10.1177/02654075211006199)

Lillie, H. M., Chernichky-Karcher, S., & Venetis, M. K. (2021). Dyadic coping and discrete emotions during COVID-19: Connecting the communication theory of resilience with relational uncertainty. *Journal of Social and Personal Relationships, 38*(6), 1844–1868. [http://doi.org/10.1177/02654075211009302](http://doi.org/10.1177/02654075211009302)

Losada-Baltar, A., Jimenez-Gonzalo, L., Gallego-Alberto, L., Pedroso-Chaparro, M. S., Fernandez-Pires, J., & Marquez-Gonzalez, M. (2021). We are staying at home.” Association of self-perceptions of aging, personal and family resources, and loneliness with psychological distress during the lock-down period of COVID-19. *Journals of Gerontology: Psychological Sciences, 76*(2), 10–16. [https://doi.org/10.1093/geronb/gbaa048](https://doi.org/10.1093/geronb/gbaa048)

Luetke, M., Hensel, D., Herbenick, D., & Rosenberg, M. (2020). Romantic relationship conflict due to the COVID-19 pandemic and changes in intimate and sexual behaviors in a nationally representative sample of American adults. *Journal of Sex and Marital Therapy, 46*(8), 747–762. [https://doi.org/10.1080/00902623X.2020.1810185](https://doi.org/10.1080/00902623X.2020.1810185)

McMillan, I. F., Armstrong, L. M., & Langhinrichsen-Rohling, J. (2021). Transitioning to parenthood during the pandemic: COVID-19 related stressors and first-time expectant mothers’ mental health. *Couple and Family Psychology: Research and Practice, 10*(3), 179–189. [https://doi.org/10.1037/cfp0000174](https://doi.org/10.1037/cfp0000174)

Merkas, M., Peric, K., & Zulec, A. (2021). Parent distraction with technology and child social competence during the COVID-19 pandemic: The role of parental emotional stability. *Journal of Family Communication, 21*(3), 186–204. [https://doi.org/10.1080/15267431.2021.1931228](https://doi.org/10.1080/15267431.2021.1931228)

Merolla, A. J., Otmar, C., & Hernandez, C. R. (2021). Day-to-day relational life during the COVID-19 pandemic: Linking mental health, daily relational experiences, and end-of-day outlook. *Journal of Social and Personal Relationships, 38*(8), 2350–2375. [https://doi.org/10.1177/02654075211020137](https://doi.org/10.1177/02654075211020137)

Neff, L. A., Gleason, M. E. J., Crockett, E. E., & Ciftci, O. (2021). Blame the pandemic: Buffering between stress and relationship quality during the COVID-19 pandemic. *Social Psychological and Personality Science, 13*(2), 522–532. [https://doi.org/10.1177/19485506211022813](https://doi.org/10.1177/19485506211022813)

Newson, N., Zein, M. E., Sulik, J., Zhao, Y., Dezecache, G., Deroy, O., & Tuncgenc, B. (2021). Digital contact does not promote well-being, but face-to-face does: A cross-national survey during the COVID-19 pandemic. *New Media & Society. Advance online publication. [https://doi.org/10.31234/osf.io/b8vfx](https://doi.org/10.31234/osf.io/b8vfx)

Nguyen, M. H., Hargittai, E., & Marler, W. (2021). Digital inequality in communication during a time of physical distancing: The case of COVID-19. *Computers in Human Behavior, 120*(5), 106717. [https://doi.org/10.1016/j.chb.2021.106717](https://doi.org/10.1016/j.chb.2021.106717)

Nuru, A. K., & Bruess, C. J. (2021). Exploring how couples navigate the COVID-19 pandemic using wellness theory. *Journal of Social and Personal Relationships, 38*(10), 2838–2862. [https://doi.org/10.1177/02654075211037742](https://doi.org/10.1177/02654075211037742)

Office for National Statistics. (2021, July 21). Coronavirus and the social impacts of ‘long COVID’ on people’s lives in Great Britain: 7 April to 13 June 2021. [https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/conditionsanddiseases/articles/](https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/conditionsanddiseases/articles/)
coronavirus and the social impact of long COVID on people's lives in Great Britain/7 April to 13 June 2021 # well-being, loneliness, and long-COVID

Office of the High Commissioner for Human Rights. (2020). COVID-19 and the human rights of LGBTI people. United Nations. https://www.ohchr.org/Documents/Issues/LGBT/LGBTIpeople.pdf

Ogan, M. A., Monk, J. A., Kanter, J. B., & Proulx, C. M. (2021). Stress, dyadic coping, and relationship instability during the COVID-19 pandemic. Journal of Social and Personal Relationships, 38(10), 2944–2964. https://doi.org/10.1177/02654075211046531

Overall, N. C., Chang, V. T., Cross, E. J., Low, R. S. T., & Henderson, A. M. E. (2021a). Sextist attitudes predict family-based aggression during a COVID-19 lockdown. Journal of Family Psychology, 35(8), 1043–1052. https://doi.org/10.1037/fam0000834

Overall, N. C., Chang, V. T., Pietromonaco, P. R., Low, R. S. T., & Henderson, A. M. E. (2021b). Partners’ attachment insecurity and stress predict poorer relationship functioning during COVID-19 quarantine. Social Psychological and Personality Science, 13(1), 285–298. https://doi.org/10.1177/1948550621992973

Overall, N. C., Low, R. S. T., Chang, V. T., Henderson, A. M. E., McRae, C. S., & Pietromonaco, P. R. (2022). Enduring COVID-19 lockdowns: Risk versus resilience in parents’ health and family functioning across the pandemic. Journal of Social and Personal Relationships. Advance online publication. https://doi.org/10.1177/02654075221095781

Panzeri, M., Ferrucci, R., Cozza, A., & Fontanesi, L. (2020). Changes in sexuality and quality of couple relationship during the COVID-19 lockdown. Frontiers in Psychology, 11, 565823. https://doi.org/10.3389/fpsyg.2020.565823.

Philpot, L. M., Ramar, P., Roellinger, D. L., Barry, B. A., Sharma, P., & Ebbert, J. O. (2021). Changes in social relationships during an initial “stay at home” phase of the COVID-19 pandemic: A longitudinal survey study in the U.S. Social Science & Medicine, 274, 113779. https://doi.org/10.1016/j.socscimed.2021.113779.

Pietromonaco, P. R., & Overall, N. C. (2021). Applying relationship science to evaluate how the COVID-19 pandemic may impact couples’ relationships. American Psychologist, 76(3), 438–450. http://dx.doi.org/10.1037/amp0000714

Prime, H., Wade, M., & Browne, D. T. (2020). Risk and resilience in family well-being during the COVID-19 pandemic. American Psychologist, 75(5), 631–643. https://doi.org/10.1037/amp0000660

Randall, A. K., Leon, G., Basili, E., Martos, T., Boiger, M., Baldi, M., Hocker, L., Kline, K., Masturzi, A., Areyeeey, R., Bar-Kalifa, E., Boon, S. D., Botella, L., Burke, T., Carmelley, K., Carr, A., Dash, A., Fitriana, M., Gaines, S. O., & Chiaroni, C. (2021). Coping with global uncertainty: Perceptions of COVID-19 psychological distress, relationship quality, and dyadic coping for romantic partners across 27 countries. Journal of Social and Personal Relationships, 39(1), 3–33. https://doi.org/10.1177/02654075211034236

Riggle, E. D. B., Drabble, L. A., Bochicchio, L. A., Wootton, A. R., Veldhuis, C. B., Munroe, C., & Hughes, T. L. (2021). Experiences of the COVID-19 pandemic among African American, Latinx, and white sexual minority women: A descriptive phenomenological study. Psychology of Sexual Orientation and Gender Diversity, 8(2), 145–158. https://doi.org/10.1037/sgd0000510
Rivers, A. S., & Sanford, K. (2020). Interpersonal resilience inventory: Assessing positive and negative interactions during hardships and COVID-19. *Personal Relationships, 28*(2), 316–336. http://doi.org/10.1111/pere.12362

Rodriguez, L. M., Stewart, S. H., & Neighbors, C. (2021). Effects of a brief web-based interpersonal conflict cognitive reappraisal expressive-writing intervention on changes in romantic conflict during COVID-19 quarantine. *Couple and Family Psychology: Research and Practice, 10*(3), 212–222. https://doi.org/10.1037/cfp0000173

Russell, B. S., Tambling, R. R., Horton, A. L., Hutchison, M., & Tomkunas, A. J. (2021). Clinically significant depression among parents during the COVID-19 pandemic: Examining the protective role of family relationships. *Couple and Family Psychology: Research and Practice, 10*(3), 190–201. https://doi.org/10.1037/cfp0000175

Salerno, J. P., Doan, L., Sayer, L. C., Drotning, K. J., Rinderknecht, R. G., & Fish, J. N. (2021). Changes in mental health and well-being are associated with living arrangements with parents during COVID-19 among sexual minority young persons in the U.S. *Psychology of sexual Orientation and gender diversity*. Advance online publication. https://doi.org/10.1037/sgd0000520

Saltzman, L. Y., Hansel, T. C., & Bordnick, P. S. (2020). Loneliness, isolation, and social support factors in post-COVID-19 mental health. *Psychological Trauma: Theory, Research Practice and Philosophy, 12*(S1), S55–S57. https://doi.org/10.1037/tra0000703

Salvador, C. E., Berg, M. K., Yu, Q., San Martin, A., & Kitayama, S. (2020). Relational mobility predicts faster spread of COVID-19: A 39 country study. *Psychological Science, 31*(10), 1236–1244. https://doi.org/10.1177/0956797620958118

Schokkenbroek, J. M., Hardyns, W., Anrijs, S., & Ponnet, K. (2021). Partners in lockdown: Relationship stress in men and women during the COVID-19 pandemic. *Couple and Family Psychology: Research and Practice, 10*(3), 149–157. https://doi.org/10.1037/cfp0000172

Schrooyen, C., Soenens, B., Waterschoot, J., Vermote, B., Morbee, S., Beyers, W., Brenning, K., Dieleman, L., Van der Kaap-Deeder, J., & Vansteenkiste, M. (2021). Parental identity as a resource for parental adaptation during the COVID-19 lockdown. *Journal of Family Psychology, 35*(8), 1053–1064. https://doi.org/10.1037/fam0000895

Scott, A. M., & Stafford, L. S. (2021). Engaged women’s relationships, weddings, and mental health during COVID-19. *Journal of Family Issues*. Advance online publication. https://doi.org/10.1177/0192513X211041986

Shufford, K. N., Hall, D. L., Randall, A. K., Braunstein, B. M., O’Brien, M. M., & Mickelson, K. D. (2021). Connected while apart: Associations between social distancing, computer-mediated communication frequency, and positive affect during the early phases of COVID-19. *Journal of Social and Personal Relationships, 38*(10), 2906–2920. https://doi.org/10.1177/02654075211041316

Solomon, D. H., Knobloch, L. K., Theiss, J. A., & McLaren, R. M. (2016). Relational turbulence theory: Explaining variation in subjective experiences and communication within romantic relationships. *Human Communication Research, 42*(4), 507–532. https://doi.org/10.1111/hcre.12091

Stamps, D. L., Mandell, L., & Lucas, R. (2021). Relational maintenance, collectivism, and coping strategies among Black populations during COVID-19. *Journal of Social and Personal Relationships, 38*(8), 2376–2396. https://doi.org/10.1177/02654075211025093
Stuart, J., O’Donnell, K., O’Donnell, A., Scott, R., & Barber, B. (2021). Online social connection as a buffer of health anxiety and isolation during COVID-19. *Cyberpsychology, Behavior and Social Networking, 24*(8), 521–525. https://doi.org/10.1089/cyber.2020.0645

Thomeer, M. B., Yahirun, J., & Colon-Lopez, A. (2020). How families matter for health inequality during the COVID-19 pandemic. *Journal of Family Theory and Review, 12*(4), 448–463. https://doi.org/10.1111/jftr.12398

Vowels, L. M., Carnelley, K. B., & Francois-Walcott, R. R. R. (2021). Successful negotiation of goal conflict between romantic partners predicts better goal outcomes during COVID-19: A mixed methods study. *Journal of Social and Personal Relationships, 39*(2), 155–178. https://doi.org/10.1177/02654075211033341

Waddell, N., Overall, N. C., Chang, V. T., & Hammond, M. D. (2021). Gendered division of labor during a nationwide COVID-19 lockdown: Implications for relationship problems and satisfaction. *Journal of Social and Personal Relationships, 38*(6), 1759–1781. https://doi.org/10.1177/0265407521996476

Walker, K. K., Head, K. J., Bute, J., Owens, H., & Zimet, G. D. (2021). Mothers’ sources and strategies for managing COVID-19 uncertainties during the early pandemic months. *Journal of Family Communication, 21*(3), 205–222. https://doi.org/10.1080/15267976.2021.1928135

Wang, M., Henry, D. A., Del Toro, J., Scanlon, C. L., & Schall, J. D. (2021). COVID-19 employment status, dyadic family relationships, and child psychological well-being. *Journal of Adolescent Health, 69*(5), 705–712. https://doi.org/10.1016/j.jadohealth.2020.07.016

Williamson, H. C. (2020). Early effects of the COVID-19 pandemic on relationship satisfaction and attribution. *Psychological Science, 31*(12), 1479–1487. https://doi.org/10.1177/0956797620972688

Williamson, H. C., Bornstein, J. X., Cantu, V., Ciftci, V., Farnish, K. A., & Schouweiler, M. T. (2021). How diverse are the samples used to study intimate relationships? A systematic review. *Journal of Social and Personal Relationships, 39*(4), 1087–1119. https://doi.org/10.1177/02654075211053849

Worley, T. R., & Mucci-Ferris, M. (2021). Parent-student relational turbulence, social support processes, and mental health processes, and mental health during the COVID-19 pandemic. *Journal of Social and Personal Relationships, 38*(10), 3010–3032. https://doi.org/10.1177/02654075211041658

Woznicki, N., Arriaga, A. S., Caporale-Berkowitz, N. A., & Parent, M. C. (2020). Parasocial relationships and depression among LGBQ emerging adults living with their parents during COVID-19: The potential outline for support. *Psychology of Sexual Orientation and Gender Diversity, 8*(2), 228–237. https://doi.org/10.1037/sgd0000458

Wright, M. F., & Wachs, S. (2021). Moderation of technology use in the association between self-isolation during COVID-19 pandemic and adolescents’ romantic relationship quality. *Cyberpsychology, Behavior and Social Networking, 24*(7), 493–498. https://doi.org/10.1089/cyber.2020.0729

Yang, S. W., Soltis, S. M., Ross, J. R., & Labianca, G. (2021). Dormant tie reactivation as an affiliative coping response to stressors during the COVID-19 crisis. *Journal of Applied Psychology, 106*(4), 489–500. https://doi.org/10.1037/apl0000909

Zhou, Y., MacGeorge, E. L., & Myric, J. G. (2020). Mental health and its predictors during the early months of the COVID-19 pandemic experience in the United States. *International Journal of...
Zoppolat, G., Righetti, F., Balzarini, R. N., Alonso-Ferres, M., Urganci, B, Rodrigues, D. L, Debrot, A., Wiwattanapantuwong, J., Dharma, C., Chi, P., Karremans, J. C., Schoebi, D., & Slatcher, R. B. (2022). Relationship difficulties and “technoference” during the COVID-19 pandemic. *Journal of Personal and Social Relationships*. Advance online publication. https://doi.org/10.1177/02654075221093611