I am extremely pleased to sponsor a series of articles on couples therapy for the Psychologist-Psychoanalyst. In the following three essays we will try to provide a glimpse of the richness of working with couples from an integrated systemic and psychoanalytic perspective.

Psychoanalysts are interested in couples therapy today, for a variety of reasons. It is a therapeutic modality that has acquired a new acceptability—even attractiveness in the general population. (Gerson, 1996). Why is this so? For one thing, sweeping changes in social ideology (represented most forcibly in the feminist revolution) has deconstructed time-honored assumptions and expectations regarding family structure. What is commitment in postmodern culture? Is exclusivity possible in an age of distracted consumerism? Each couple has to cobble together its own schema. It probably has never been easy to share your life with someone. However, the psychic challenge of "togetherness," i.e., integrating developmental anxieties, issues of separation, unresolved identifications, without clear consensual guideposts, becomes overwhelming for many couples. Analysts are more frequently asked for referrals to couples therapists or more readily consider making a referral themselves. Thus developing a personal grasp of the therapeutic action of this form of therapy is useful, even if one has little personal interest in conducting it.

Sheila Sharpe's article, The Development of Couple Relationships is a rich presentation of the patterns that facilitate connection as well as separation. For Sharpe, our culture's mythology of "romantic love" has inhibited attention to the necessary adult developmental processes that allow for the enhancement of lifelong needs, such as the reception of nurturing. Sharpe stresses that certain patterns can become rigid or defensive and dominate mature relating. The therapist, aware of a collusive transference construction, i.e. to a benevolent or controlling parent, and her attendant countertransference reaction, can help dissolve the rigidity of the pattern.

I have always believed that working with couples invites us to reconsider many of our assumptions regarding transference, countertransference, and self-formation—practically every important concept we work with. The shift in context generates questions that lead to new perspectives and discoveries. In Shelly Goldklank's article, Couples and Countertransference, we are presented with a creative look at transference and countertransference. Goldklank broadens her geometry of these concepts to include their action between members of the couple as well as with the therapist. For Goldklank, the fulcrum of couples treatment is a shared conflict, masked in the couple's initial attraction by different and often opposing defensive styles. When the therapist is drawn into the conflict, and investigates it with the couples, each partner has "the opportunity to find the analog" of their own, personal and restricted solution.

I find that couples work is often described as pleasurable by analysts. A classically oriented colleague of mine once suggested it to a class I was teaching that couples therapy provides a wonderful release for the "aggression" one can't express in individual treatment. An interesting idea, but not one I would personally proffer. Rather I think that working with dynamics in "real relationships," adds a different kind of vitality to our therapeutic experience. We are all generally more informal, more overtly "active," and more playful in couples work partly because our unit of treatment—the couple—shares a life beyond us which is bounded and somewhat exclusive of us. We are offered a different set of degrees of freedom in couples treatment.

There is a panoply of approaches to couples work and every orientation within psychoanalysis—from the classical to the existential—offers unique possibilities for exploration and expansion of experience. In a subsequent issue, an integrative perspective will be presented in relation to other clinical situations and problems. Most of all, I hope these articles invite you to think with us, and perhaps join us in Section VIII, Couples and Family Therapy and Psychoanalysis, founded in 1996, to house this challenging and enriching area of clinical thinking.

References

THE THERAPEUTIC ACTION OF COUPLES THERAPY

Mary Joan Gerson, PhD

In this article, I’d like to think about the following question: What is unique about the process of couples therapy? For one thing, I think that the lens of couples therapy offers a sharp clarity about one’s “personified self,” in Sullivanian terms. Sullivan (1950) described the envelope of the “personified self,” a reified, sanitized version of oneself, which remains unaffected by interpersonal feedback because of the protective radar of security operations. When partners are facing—not imagining or recollecting each other—and the therapist helps penetrate the collusive shield of anxiety, self-protection is buffeted. The effect can be one of acute and fresh self-recognition and expansion.

I am working with a couple that includes a wife who chronically and poignantly wonders whether she has any powerful feelings towards her husband. Was their union exclusively a pronatal venture, a wish to share parenthood and little else? Of course there exists a plethora of relevant issues: her childhood history of physical abuse; his nurturance which is paren tally healing but inevitably desexualized; his compulsive caretaking which blindsides him to other of her needs, etc. In their most recent session she said she felt she had to raise—though with reluctance to hurt—the fact that she no longer currently desired him at all. Because this followed another session in which she had questioned her basic love for him, her husband became utterly defeated and hopeless. I asked him whether he could, in spite of his distress, recognize her revelatory statements as possibly expressing commitment and concern for their marriage—after her own fashion. She truly believes, as she has said in our sessions, that one must “clean wounds” before they can heal. He is so non-confrontational and solicitous that entertaining this hypothesis took every bit of his effort, and in doing so he inevitably had to face his own restricted repertoire of “loving.” I didn’t have to urge her to reflect on her behavior. She was visibly alarmed and shocked at the wake of devastation her remarks produced. She had lost sight of his raw and real emotional attachment to her. Because she always had her saber drawn, she assumed he was merely frightened of her. She had felt unlovable, which only made her more strident.

This material lends itself to what I am most interested in conveying as the essence of the “good enough” couples therapy hour. For me, the therapeutic action of couples therapy lies between the couple, generally carrying with it heightened emotionality (though with highly reactive couples, a moment of cooled-down irony can be most mutative). It is a moment in which each person temporarily loses his/her moorings of personified self, and reemerges with a reshaped contour. Though the plasticity of self-experience has become a hallmark of postmodern psychoanalytic theory, and both Mitchell (1993) and Bromberg (1999) have emphasized shifting boundaries, our culture privileges self-definition and self-containment. Couples therapy provides the arena for perhaps our most challenging existential task—that of articulating ourselves while recognizing that we are inexorably embedded and defined by the reflections, the longings and the perceptions of significant others. Intimacy is the natural habitat of our psychoanalytic “two person psychology.”

I’ve felt the need as I’ve worked with couples to find a representation, an arbor to house the co-construction of two lives, of two sensibilities. Our therapeutic language of “self” and “other” constrains, rather than expresses, this psychic reality. Minuchin (1981) suggests that our language system generally fails us in capturing this reality, proposing, for example, the term “mochild” or “other” to signify the mother-child unit. For a long time, my experience of witnessing the psychological mesh of a couples relationship exposed and unraveling in my office has felt inherently dramatic to me, a slice of life consumed before me as well as served up, presented to me as witness (Gerson, 2001a). When I researched the roots of drama, I became more and more interested in its origin as cultural ritual; drama has always provided a means of providing spectacle and intensity to strengthen prevailing belief systems or articulate newly arisen conflicts. Ultimately, it seems to me that the dramatic impact of a couples session emerges from its power as ritual (Gerson, 2001b). In the case of couples in a post-modern, secular and hyper-autonomous culture, the ritual power of couples therapy lies in its subversion of the prevailing ideology that “I should be my own person,” or “I can reinvent myself” to an experience that our identities are co-mingled and, yes, co-dependent. How each partner co-constructs each other’s reality becomes a new field of exploration, akin to Ogden’s (1994) “third” in dyadic treatment.

Here’s the rub. I think that psychoanalysts who work with couples experience disequilibrium as well. I believe that since we can’t unpack the transference experience of each member of the couple fully (it is complicated enough with the individuals we work with!), and because our own counter-transference experience cannot be adequately decoded in a true analytic sense (to each person? with the couple as unit?), we index these crucial dimensions in our work but we inevitably develop a different stance towards therapeutic action. For if the couple is to interact with fluid boundaries, the therapist has to move out of their field, at least temporarily, and we are used to being at the
center, the fulcrum of change. Psychoanalysts, who have developed some of the richest developmental theories, can help couples find their intersubjectivity by zooming into to present experience, and granting it as much drama as genetic connections. Psychoanalysts often find that they have to focus on the pragmatics of communication, what individuals are doing with each other, how they are using language, as much as on the symbolic meaning of communication. When a husband says, “I’m damaged goods,” to his wife, a supervisee feels enormous compassion towards him. But his statement preempts his wife from making any emotional demands on him! And, lastly, we have to tolerate individuals being central protagonists of change for each other, when we have been drawn to this work because of its possibilities for a kind of wrestling intensity.

How to proceed? Let me sketch some of the approaches I take in my couples work. After all, I began with a proposal about the “uniqueness” of couples therapy. It’s a choreography of multiple possibilities, but let me give you a sense of my own notation.

1. I think that focusing on present circularity intensifies therapeutic exploration. The classic circle is distance/pursuer (generally he runs and she chases). But circles have infinite variety, e.g., he is innocent because she is accusing; she is evasive because he is invasive, she loves his “holier than thou-ness,” because she can withdraw to more sinful distractions. There are obvious and veiled circles, primary and secondary loops. Often the most generative way to identify a circular dynamic is so let an image or metaphor float into awareness.

2. I am always interested in past experience, and in fact taking a genogram history of each partner (lasting for one session), in approximately the third or fourth session. However, here I fuse my systemic and psychoanalytic approaches and follow a line of spontaneous inquiry, “Do you think that your mother was so hysterical (or nasty, or alcoholic) partly because your father dismissed her? People rarely think of their parents as co-constructors! I generally try to interrupt what Donnell Stern (1997) calls “narrative rigidity” (p. 129), and formulate the “unformulated” which will hopefully then extend to looking at surprising interpersonal influence within the couple’s relationship.

3. I think that we as psychoanalysts, whose founding father was a renegade trained in the medical model, still carry remnants of that tradition in our clinical approach. We simply don’t pause often enough to ask, “What’s right about their relationship?” “What’s resilient, or even admirable about their relationship configuration?” Removing the filter of pathology often liberates new thinking and new experience.

4. I think that in addition to focusing on the pragmatic of communication between the couples, i.e., what he is doing by what he is saying, which is enough of a symbolic loss for us as psychoanalysts, there is a necessary minimalism in successful couples work. We know how complicated one psyche is, and how exponentially complicated looking at our interaction with someone is. Two people? Impossible if the lens stays fully open all the time. We inevitably will overexpose our image. I think that following one reciprocal image, one theme, one surprising discovery of the other for a period of time, a number of sessions, provides a transitional space for a couple to expand their relationship. Being fully open to association and psychic meandering, the pleasure of analytic work, often leads to exhaustion, discouragement and entropy in couples therapy.

I truly see this field as open to new movements and new compositions. In fact our analytic efforts would benefit from new couples choreographers.

References


Mary-Joan Gerson, PhD is a faculty member and a supervisor in the N.Y.U. Postdoctoral Program in Psychotherapy and Psychoanalysis, where she co-directs the Project in Family Theory and Therapy. She directed family therapy training in the PhD program in clinical psychology at N.Y.U. for fifteen years, serves on the Board of Directors of the Minuchin Center for the Family, and is a faculty member of Mount Sinai Medical School. Dr. Gerson is the author of The Embedded Self: A Psychoanalytic Guide to Family Therapy (The Analytic Press, 1996), as well as many articles on psychoanalytic/systemic integration, chronic medical illness and coping, and parenthood motivation. She is the Founding President of Section VIII (Couples and Family Therapy and Psychoanalysis) and now serves as Member-at-Large on the Division 39 Board of Directors.