Experiential Approaches to Couples Therapy

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Secure Functioning

- Operate as a two-person system
- Based on attraction not fear
- Solutions need to be good for both partners, otherwise it is not good at all
- Partners have each other's "Owner's Manual"
- Partners repair quickly, and reduce threats
- Protect the partner in public and private
- Partners can discuss difficult topics without fear of dysregulating
- Partners don't avoid conflict
- Partners can play, and laugh with each other

Secure Functioning

- Not the same as secure attachment
- Not restricted by personality, or attachment organization
- Based on agreements for thriving as a two-person system
- Based on fairness, mutuality, and justice
- Based on collaboration, cooperation
- Couple is expected to be sensitive and transparent to each other
- Couple share power and make decisions about finances, kids, in-laws, etc together
- Therapist expects couples to behave according to Secure Function and if they are not therapist wonders why

Couples Therapy (PACT)

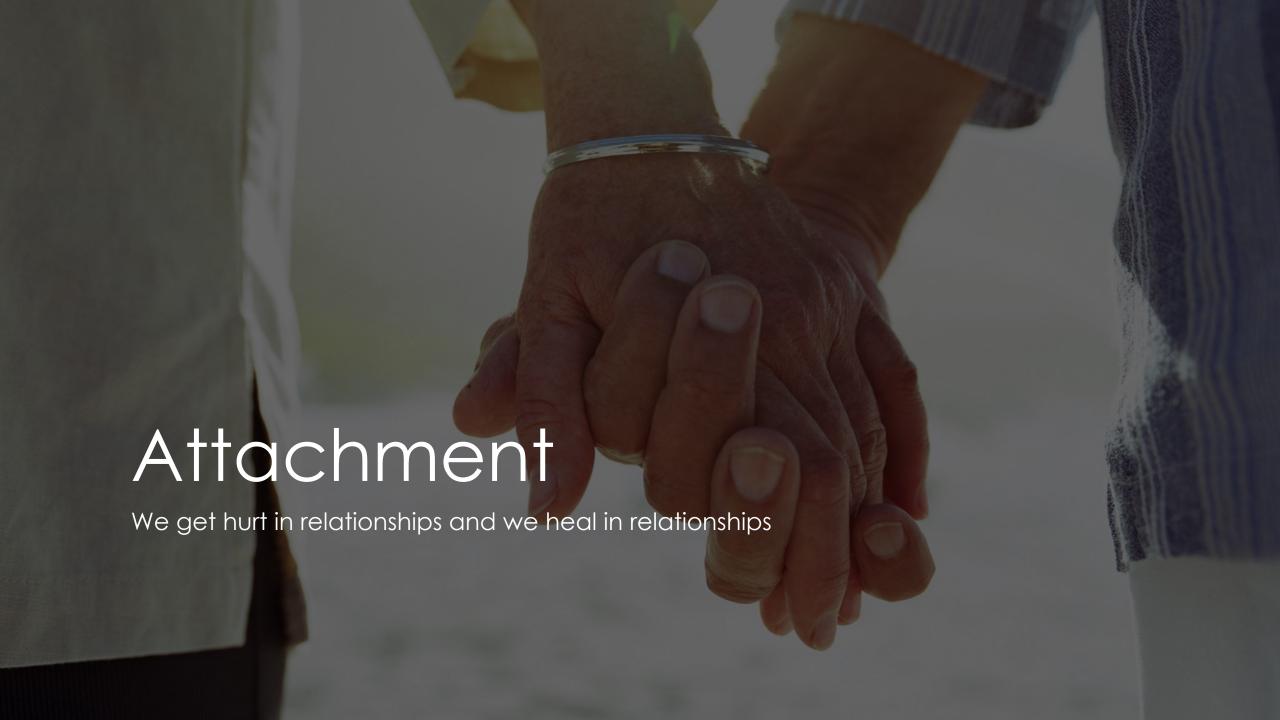
- ► Attachment Theory: Bowlby, Ainsworth, Fonagy, etc
- Developmental Neuroscience: Shore, Porges, Dan Siegel
- Arousal Regulation: Shore, Porges, Siegel
- Psychoanalytic/psychodynamic: Masterson, Freud, Scharff, etc
- Family Systems: Whitaker, Papp, Satir, Minuchin, etc.
- Psychodrama: Moreno, Dayton
- Trance: Erickson, Zeig, Gilligan, O'Hanlon, Rossi, Phillips, Watkins
- Social Justice: Carol Gilligan, Boszmormenyi-Nagy
- Body therapies: Levine, Ogden, Fosha
- Trauma: Van Der Kolk, Fisher, Levine

Why use Experiential Approaches?

- Help couples understand and express their attachment and intimacy base needs
- Provide couples with avenues for talking from their hearts and head
- Uncover unacknowledged emotions
- Help work through defenses and unhelpful behaviors
- Provide access to emotions and thoughts that are below the couple's awareness
- Uncover hidden pain, fear, shame that underlie relational difficulties and unhealthy decision making
- Human beings learn through experiences

Experiential Techniques

- ▶ They are bottom-up, right brain and improvisational
- We create experiences to explore, process and give feedback to the couple
- It brings the issues to the present moment, instead of talking about it
- It helps therapist assess attachment organization based on here and now, concrete examples instead of explaining it theoretically
- It is based on careful observation of the couple's signal system, and arousal regulation
- It helps couples experience greater regulation and secure function



Attachment

- ► How we were held as infants, is going to be the way we will "hold" ourselves as adults and the way we let others "hold" us in romantic relationships
- Our nervous system learns to co-regulate by receiving information directly from caregivers, and that regulation becomes who we are on a neurological level
- How we felt when were held, nursed, rocked, and the qualities of the attachment figure impact the baby's nervous system, and get imprinted into their nervous system and body through implicit, non-conscious memory

Strategic in creating experiences

▶ How to set up experiences that will try to answer these questions:

What is it?

What to do about it?

Who are these people?

What do they really want?

What are they up to?

Therapeutic Container

- ► Task, games, exercises that provides valuable information about partners to both partners and therapist. Examples: Beckoning, Collaborative Narrative, Face to Face, etc
- The stress inherent to the task is vital to address the bottom-up (implicit) process as it allows the therapist to witness it in real time
- Help therapist assess, elucidate, expose social-emotional function, attachment organization, arousal regulation, developmental delay, communication, etc
- Containers are experiential

Dana and David-Who are they now?

- Unmarried, cohabitating, heterosexual, biracial, and multicultural couple in their early 40's have one 6yo daughter
- Have been together for 7years
- Previous couples therapy addressed Dave's pornography use but couples still haven't had sex for the past three years.
- Couple's communication and interactions focused mostly on their daughter, and household
- Communication was difficult with them snapping at each other but mostly they avoided each other. Dave doesn't have meals with daughter Dana
- They don't trust each other, have lots of conflict, with no reparation or resolution

Who are they developmentally?

- Partner Attachment Interview
- Developmental history
- Traumas
- Knowledge each partner has of the other
- How they use their knowledge of their partner's history
- Buy in for the avoidant partner
- ► Face to Face: partner's reaction in real time

Therapeutic Container

- ► Take your time to decide on WHAT to do
- Act on inspiration, NOT pressure
- Investigate
- Corroborate with the partner
- ► Test hunches and hypotheses
- Observe the shifts in arousal and affect
- Create experiences that serve as containers for the insights, and interpretations to happen
- Makes the implicit, explicit

Dana and David: Who are they developmentally?

- Dave has a hx of chronic pornography use that started as a teen. He also has a hx of physical abuse by his older brother who knocked him UCS a few times: "I couldn't move. I thought I was going to die". Parents both worked during the day. "My parents never fought" even though they all knew that father had an affair for decades. Mother never wanted to divorce. "We never talked about those things", "It's all about keeping appearances".
- ▶ Dana didn't know her bio father. Mom married her step-dad when she was 2yo. She considers him her dad. Dana witnessed countless fights between her mom and step-father until they divorced when she was 13yo. Mother moved to another state to advance her career and she stayed with step-father. "I lost the person that I was closest to. It was traumatic". She lived in a rough neighborhood being exposed to drugs, gangs and violence.

"I see you": PAI feedback

Connecting the dots between their Attachment history and their current relationship:

- ▶ It seems that neither one of you learned to have close healthy relationship. You actually learned to avoid conflict because it can be dangerous. You didn't learn how to manage conflicts, and repair after a fight. You were close to your moms, but you also learned to keep it to yourselves a lot.
- It's hard for you to trust that your partner is going to be there for you
- There were a lot of traumatic events in your lives and I see that it affects you and your relationship that you are not completely aware at times

How they got here: Relationship History

- ▶ They met on a dating site and dated for 3 months until Dave ended the relationship: "She was confronting me and I didn't like it"
- One week later Dana found out that she was pregnant
- Dave said: "I don't want to be a part time dad" and he moved in with Dana
- Dave stopped wanting sex with Dana when her belly grew
- Dana suffered from post partum depression; she found out that Dave was using pornography and refusing to have sex with her even when she was able to
- Dave had problems with anger management
- They grew distant. They both felt that their partner was with them for convenience and not really love, even though they reported that they loved their partner

How to create experiences

Create awareness of own insecure behaviors

Insight into the origins when necessary

Help couples experience Secure Functioning

Techniques Used

- Face to Face: They missed cues from their partner/negative assumptions about partner
- Face to Face PAI
- Psychodrama: Warm Up exercises, Double, Sculpting
- ▶ Re-enactments: Reparation/Amends/Error correction
- Beckoning
- Declarations
- Hypnosis

Face to Face: Who are you now behaviorally?

- How couple would react when put under the stress of looking to each other?
- Would they be able to stay in the present moment curious and open OR they would go into their past traumatic history?
- What stories they tell themselves about their partner and relationship?
- Couple mostly avoided each other even in session they didn't look to each other during session
- How was each partner's regulation?
- Ex: Swinger couple- wife fled when therapist asked to look to their partner's face for more than a few secs

Face to Face: Instructions & Questions

- Turn to each other, not only your face; your entire body. Get as close as you can with your knees touching. Just look to your partner's face. Observe your parent's reaction and your own reactions. Keep looking to each other as I ask questions:
- What do you see? Do you like what you see? Is this comfortable? Who is more comfortable? How do you know? What do you see in your partner that shows their comfort/discomfort? Do you this at home?
- Make observations about each partner: "Your partner frowned when you said that he/she is not comfortable. Do you know why?"
- Negative assumptions: "your partner is smiling, why do you say that she/he is angry at you?"
- Be playful: "Change something on your partner so they feel more comfortable"



Face to Face Feedback

- Dana and David:
- Misattunements
- Misappraisals
- Misunderstandings
- ► They were not attuned to each other, so they used a lot of misappraisals which caused a lot of misunderstandings and miscommunication
- ▶ Homework: have face to face conversations

What do you really want? Declarations

- I was asking myself: Does anyone want out?
- What's the commitment?
- What are the non-stated agendas?
- Clarify their agendas to each other and themselves
- Check if they are able to "self activate": declare what they really want in the relationship
- Pay attention to the language and metaphors the couple uses
- Dana and David: There's a wall of protection around each one of them

Declarations of Commitment

Instructions: Look at each other. I'll offer a statement and I'd like you to say it and observe how you feel. Observe your partner's reaction.

Declaration Statements-

- I choose you
- ► I'm yours forever
- I'll do everything you want me to
- Declarations target the partner's attachment defenses
- ▶ Observe couple's non-verbal behavior

Beckoning

- Assess the couple's ability to seduce each other
- Help them experience play, and fun engaging
- Help couple with the notion that they attract more with honey than vinegar
- Show them what the effects of their behavior on their partner
- Show that non-verbal means of attraction work better
- OBS: May bring frustration when partner is unable to use non-verbal means of attraction

Beckoning: Instructions

- One partner is going to be the Beckoning partner and the other is going to Beckoned partner
- Each partner is going to be in opposite parts of the office with nothing in between partners
- Beckoning partner has to bring the Beckoned partner closer without using words or sounds
- Beckoned partner will move closer only if the gestures work
- Repeat a couple times asking the Beckoning partner to try something different
- Switch roles

Psychodrama: Warm Up Exercises

- ► Instructions:
- Stand in opposite ends of the office.
- One is going to be the Leader and the other is going to follow
- Leader takes a body posture and the partner has to do the same posture
- Change roles

Psychodrama: Warm Up

- ▶ Teaches partners to track each other, attune to the partner
- Brings flexibility, and fun
- ▶ It helps with the readiness to move into action



Psychodrama: Lovers Pose

- Preparation/Warm Up
- Intervention
- Feedback

Lovers Pose

- Instruct the couple to move to the couch and take the Lovers pose.
- Ideally partners will change roles
- Each partner stay 20min in each position
- Therapist observe, doesn't intervene a lot, and give much space for the couple to keep looking to each pother
- This is a powerful and state changing position
- ▶ This position is about hold and being held
- Feedback and interpretations are linked to the info from the Attachment interview

- Stimulates interaction
- Expresses what the client might be feeling but not explicitly saying
- Expresses the inner truth for the person
- Provides empathy
- Encourages partners to express themselves more fully

"I want to understand you. Let me talk as if I'm in your situation and you correct me if I'm incorrect. Is that ok?"

- ▶ Why did I use Double with Dana and David?
- Dana took long time to answer any question I asked her
- Dave was more verbose and would get off topic often
- Dana had to stand up from her chair and pace bc of so much anxiety
- Both partners had trauma in their lives
- I wanted to move the session along but wanted to be empathetic with them.

- Therapist as Dana's Double: "It's so hard to talk. I have so much anxiety."
- ▶ Dana: "It's hard. All the lies that he is saying about me are making me anxious."
- Dana's Double: "All the lies!"
- Dana: "I can't tell him that those are lies. He can get angry"
- Dana's Double: "He can get so angry. I'm afraid of his anger"
- ▶ Dana: "So afraid..."
- Dana's Double: "So I don't say anything, but I get so anxious"

- David: We are never get over this. It frustrates me. I had worked on myself for the last three years on anger management.
- David's Double: "We'll never move past this. I don't know what else to do"
- David: "I don't think she sees how much I've changed. How much I worked on myself. How careful I am in all the time"
- David's Double: "I put so much effort! I'm not sure if she sees it. I get discouraged. I give up."

Avoidant defenses preventing change

- Dana-"I hide what I feel all the time. I have a wall."
- Dave- "I have to hide my frustrations at home and at work. I can't be myself".
- ▶ They both used avoidant mechanisms to cope with stress which would explain the lack of sex, intimacy, and communication, use of porn etc.
- Cycle:
- ▶ Dana would do something that David didn't like. He would be upset but wouldn't say anything. He stonewalls. Dana notices his reaction but either doesn't ask or apologizes. Dave doesn't accept the apologies. "I don't want her to apologize, I just want her to stop hurting me"









Psychodrama: Therapist Sculpting

DEMO

Therapist Sculpting (TS)

- ▶ Therapist does the sculpting of the problem by the client's direction
- TS engages the client in a collaborative process to define and strategic solution of problems
- Externalize the implicit aspects of the problem
- ▶ TS has emotional impact, and it memorable
- ► TS expands the understanding of the problems
- TS helps therapist to join the client's phenomenological world and look at the world from the patient's perspective

Therapist Sculpting: Instructions

- 1. Identify the problem state: Think about a moment when you had the problem.
- ▶ When you are in this situation, how do you feel?
- Where do you feel it in your body?
- What's the sensation?
- 2. Externalize the problem: Use your imagination and transfer the feeling/energy to me
- Help me to be a presentation of how you feel when you are in that state. Think of me as a piece of clay that you are sculpting

Therapist Sculpting: Instructions

- **3. Identify Cognitive Patterns**: What are you thinking? What are the thoughts that you usually have in this state?
- Give a title to this state
- Do the sculpting of the partner if there's time
- 4. Identify Goal State: Move away from the Problem state sculpture

Therapist Sculpting of the problem state during an argument

David

- Sculpture: Paralized on the chair
- Memory: "My best friend in school said that I was scarry. After that I stayed by myself during breaks so nobody would be afraid of me. I didn't want to hurt anyone."

Dana

- Sculpture: Blob on the ground (Yes! I was like a blob on the ground! Welcome to my world!)
- No energy/motivation/no life/dead
- "I just want to him to see how much he hurt me. I won't get up until he sees it"
- "It killed me. What happened killed me"

Conclusion

- Experiential techniques are not a stand alone in couples therapy
- Careful thought, insight, interpretation are the containers where the experiential techniques happen
- Helping couples get moving again as they express themselves emotionally is very important
- Experiential techniques should not be a grab bag nor should be used without a solid theory base
- Techniques should take in consideration the therapist's and clients' worldview, sense of self, present issues, etc.
- Experiential work requires therapists to act therapeutically when resistance emerges, or it doesn't go as expected