

Therapeutic Intervention in a Client Case Scenario

Enni Pääkkönen

Department of Microbial Cellular and Molecular Biology, Ethiopia

Abstract

The client family system involved a couple; Jane and Dave. Initially, Jane kept contemplating why anyone would prefer marriage but did not discern specific motivations that make young men and women enter marriages. She had experienced her parent's divorce during her childhood. As such, she had put the idea of marriage off her life. Even after being with Dave for five years, she did not acknowledge the point of altering a laid-back dynamic that she had committed to and maintained for a significant period. She wondered whether Dave felt the same. Their relationship had emerged out of two fulfilling and very busy lifestyles. Some of the activities into which they engaged included family activities, traveling, connecting and having fun with friends, and juggling hobbies. By the time they decided to stay together, their central motivation was that the decision would add stability to their relationship and that they would spend more time together. They also felt that the decision to stay together would enable them to determine common preferences while transforming any issues of divergence into opportunities for improvement and strengthening their bond.

1 Introduction

Whereas Dave and Jane were happier to have made the decision, it was shortly after the implementation of this decision that Jane felt uncomfortable with how Dave approached domestic life. This situation made her feel much disconnected and further away from marriage preferences. Particularly, Dave was uncomfortable with Jane's decision to continue going out at the expense of spending time with him. Whenever Jane introduced discussions about nights out, Dave's reluctance was evident. In most cases, they would end up in arguments. Hence, going out had been fun in the past, but Jane failed to understand Dave's change of attitude. On some occasions, she would be forced to go out with her friends, but the decision to leave Dave at home also made her feel guilty. The two were also unable to express themselves on how they felt.

When the couple realized that they need to act, they contacted a Relate Center to seek a therapist's help; especially in the wake of some stumbling blocks that threatened to destabilize an otherwise stable relationship. In the course of the first three sessions, Jane realized that she had been held back by fear. Also, she realized that she was avoiding commitment due to her childhood experiences. On the other hand, Dave noticed that he had never had a deeper discussion with Jane regarding her childhood upbringing. In the fourth session, Dave also noticed that he had never had a constructive conversation to discern how Jane felt regarding the decision to move in together. Instead, he stated that the decision to move in together just happened.

Therefore, the therapist helped Dave and Jane to talk through what they felt were their expectations. Also, the therapist guided the couple towards working out how they would negotiate and compromise where possible to accommodate each other's views and preferences. The main aim was to ensure that Jane and Dave feel more confident and secure in pushing the relationship forward. Imperatively, Dave's parents were still together. Also, Dave's parents were White while Jane's

parents were of the African-American origin. Both families were of middle-class and Dave was self-employed while Jane was pursuing further studies. Similarly, Dave's and Jane's families were Christian. At the time of the therapist's intervention, the couple did not have a child. Jane had two siblings (one brother and one sister) while Dave had two brothers and one sister.

2 Methodology

The therapist's initial step was to change Dave and Jane's view of the relationship. Particularly, the main objective was to help them perceive their relationship objectively while avoiding blame. Hence, the first step of engagement involved sensitizing them on the need to perceive their issues as processes that involve each partner. To understand their perception, Dave and Jane's interaction was examined — and crucial insights gained (by watching the manner in which they interacted during the initial sessions). Later, potential causal factors accounting for their differences were discerned. Later, Dave and Jane were requested to bring out their thoughts and emotions that they had feared to express to each other; especially after moving in together. At the time, the therapist ensured that the clients were less afraid by reminding them about the ethical and legal specifications governing marriage and family therapy and that the issues raised were bound to remain confidential. It was at this moment that it was established that Jane had an unmet need and that she had carried it over to the adulthood relationship. It was also discovered that Dave had not expressed his true feelings about Jane's behavior because at some point in his life, especially during childhood, he did not receive reinforcement. In summary, the engagement process involved defined goals of the therapy, developing trust with Jane and Dave, and setting therapy boundaries to make them feel safe in expressing their views. Also, the therapist set a stage for the couple to ensure that their relationship in the therapy sessions was conscious in such a way that they would each begin to understand the manner in which their actions had contributed to the conflict; a step that was poised to prompt the couple to embrace different communication styles that would restore their deservedly harmonious and joyful relationship. To ensure that the therapist learns about any sensitive issues that either Jane, Dave, or both held, the first session involved meeting each partner separately.

3 Results and Discussion

From the initial sessions between the therapist and the selected client family, one of the treatment's needs involved the quest to repair a relationship. The emerging therapeutic issue was that Jane and Dave were keen to repair their relationship for the sake of their future and even that of their children, should they have some, but the partner's point of view remained unclear to each other. It was also evident that constructive communication was a factor precipitating the tension that had already emerged. Furthermore, neither Dave nor Jane understood how their actions were contributing to the conflict. Therefore, the gap that the therapist needed to fill involved teaching the client family a method through which they could communicate and resolve their issues not only during therapy but also after the planned sessions and far into their future marriage life. The dominant therapeutic approach that was embraced involved attachment-based and behavioral marriage therapy. This approach translated into the Attachment Theory. According to Bowlby (1971) and Bagnini (2012), the role of such an emotionally focused marriage therapy technique is to study the manner in which individuals engage with each other. In so doing, emotional responses are

expanded before creating new forms of interaction and, in turn, nurture the resultant bond (Collins, Kane, Metz, Cleveland, Khan, Winczewski & Prok, 2014). Indeed, the therapeutic approach was selected because it has been associated with the best success rate when applied to couples who fail to share private feelings (Cramer & Jowett, 2010; Lebow, Chambers, Christensen & Johnson, 2012). Notably, the failure to share private feelings was evident in the case of Jane and Dave, which rendered the selected therapeutic approach appropriate. According to Dijkstra, Barelds, Groothof and Van Bruggen (2014), such a failure to share private feelings (among couples) leads to an emotionally distant relationship whereby the partners end up growing apart. In the selected client family, it was evident that Jane preferred going out even after moving in while Dave preferred spending much time together without third partners and have fun as they explore each other's life preferences and feelings. Indeed, attachment therapy in such an instance was deemed reliable due to its capacity to minimize the fear of expressing each other's private emotions (Feeney, Collins, Van Vleet & Tomlinson, 2013). Also, attachment therapy for such couples has been documented to restore closeness to each other (Greenberg, 2010; Schmidt, Luquet & Gehlert, 2016). A combining factor of behavioral therapy was also employed. According to Hill (2010), behavioral therapy is applied when partners fail to express their private feelings and emotions in fear of rejection; an attribute that was also characteristic of Jane and Dave's situation. Overall, the therapist employed the two approaches because the main objective was to help the clients to express their feelings and emotions healthily and also ensure that they are drawn together via the restoration of a harmonious and joyful bond.

4 Conclusion

In summary, the first step was to ensure that the partners establish clear goals. Particularly, the goal involved defining a better marriage and its characteristics; upon which they would have a shared vision of where they wish to be. The next step involved encouraging the partners to be ready to compromise. Specifically, both parties had been rigid initially, but they were sensitized that the achievement of the goal above would require giving a little to get a little. The next stage involved preparation to walk the talk by ensuring that they spend energy in implementing the action plan and that each partner reminds the other to perform their role when the need arises. Time dedication was another action plan for the couple. Indeed, the couple was sensitized about significant amounts of time that will be taken up as they strive to repair their marriage. Lastly, the couple was encouraged always to take time to think about why they are in marriage. Specifically, they were asked to program themselves in a way that would permit some time off domestic, work, and academic-related commitments and meditate about why they are in the marriage, the milestones they will have made, and gaps that are worth mending and improving.

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