Desire, Vulnerability, and Interweaving Worlds of Experience: An Intersubjective Systems Sensibility in Couple Therapy

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ABSTRACT

The fabric of ongoing intimate relationships is woven from strands of affect and mutually-constructed meanings. Couple therapy with an intersubjective systems sensibility concerns itself with each partner’s lived experience of the relationship, as contoured by their differing emotional convictions. Since a therapeutic encounter entails the interwoven worlds of experience, historically conditioned, of all participants including the therapist, particular understandings of relational encounters are co-constructed. The presence of both partners enables a dialogic search for understanding, empathy, and affect regulation that makes sense to all and is open to modification. The result is the partners’ increased resilience and sense of connection.

Keywords: Intersubjective systems theory. Couple therapy.
[Psychoanalysis is] a human conversation about meaning, for the purpose of organizing troubled worlds.

— Orange, 2003, p.484

In an ongoing relationship, the bonds of intimacy are a woven fabric. For warp and weft, there are enduring affective strands such as mutual affirmation, trust, and love, and there are strands of differing but mutually influenced meanings that intimacy has for each partner. When the fabric is rent, psychodynamic couple therapy may be organized around a conjoint deciphering and exploration of these differing meanings, including their historical origins, and a simultaneous regrowth of the affective bonds which have been diminished, altered, or lost. Such therapy is distinguished from more behaviorally-oriented or symptom-based approaches which might focus, for example, on negotiating or communicating skills. couple therapy of this kind is also distinguished from those forms of group therapy which concern relational configurations and interactional dynamics but do not address experiential issues of long-term partner intimacy.

The approach to couple therapy described in this paper grows organically out of a contextualist, intersubjectivist perspective on human experience. This approach is experience-near; it deals primarily with actual lived experience and its organization, rather than with putative psychic structures. Self experience is seen to be relationally constituted, and the way in which partners make sense together of an intimate relationship determines the nature of its fabric. It can be said that in any relationship, but perhaps most fully in ongoing intimate ones, partners literally call one another into being. Couple therapy in this view concerns itself with the particulars of this mutually constitutive experience in relationships which have begun to fray.

The theoretical roots of this approach are found in intersubjective systems theory as developed by Stolorow, Atwood, Brandchaft, and Orange (Orange, 1995; Orange, et. al.,1997; Stolorow, et. al., 1987, 1992, 2002). Well-organized introductory summaries of this outlook are
provided as well by Buirsky and Haglund (2003), and Buirsky (2005). Previous treatments of the application of this and related theory to couple work can be found in excellent works by Ringstrom (1994, 1998), Trop (1994), Shaddock (2000), and Leone (2006).

To provide a framework for an exploration of my version of couple work based on this view, I begin with a clinical vignette from a couple therapy case. The names of these clients are fictitious, and some details of their lives have been altered to preserve their privacy. It should be noted that several major issues have been attended to in the therapeutic work this couple has done, though these will not be described here.

THE GIFT

Bill and Trish are well into mid-phase couple therapy. He is a successful lawyer, she a highly creative at-home mother. We are talking in this particular session about judgment. Trish has pointed out that when Bill asks her or their kids to do something, he seems to send an implicit message that if they don’t agree to do it they are being stupid or inconsiderate, or in some way deficient. She and the children feel judged. Bill retorts that he himself feels judged at times. For example, he had decided to give Trish, as a present for a milestone birthday, a beautiful necklace for which he would spend a significant amount of money. Because he wanted to be sure it was one she liked, he told her about it and offered to take her around to various stores to make the particular choice. As it happened, Trish did not want this kind of gift and when Bill first brought up the subject, he felt she accused him of being insensitive about her likes and dislikes. He should already know, he heard her saying, that such jewelry was too ostentatious for her and that she would never wear it.

Bill is remembering feeling crushed. He explains in the session that he has worked hard to be where he is, that he doesn’t have the least concern about the money involved in the gift, and that being able to buy his wife such a present would make him proud. In addition, the gift would
represent his love and devotion, as well as the importance he places on pleasing her.

Trish responds that the two of them have discussed this issue many times in the past and that she is in fact annoyed that Bill doesn’t remember this about her. To her, a fancy necklace would not be a sign of love, but rather a sign of Bill’s need to feel good about himself. She says she wouldn’t even object to that, if it didn’t entail her own discomfort.

The conversation comes to a tense pause. Bill seems lost in thought, as is Trish until she looks at me expectantly. At this moment I ask what she is feeling, in view of what seems like a familiar impasse. In my thoughts, I am not looking for a way to decide what should be done about the gift, and we are not attempting to determine which partner is “right” about the issue. A veneer of calm, conjoint exploration will ensue, although I can easily sense strong emotional undercurrents and the potential for a fight. I am aware that both partners’ positions are making sense to me, and I feel called upon (by whom I am not sure) to keep the dialogue going.

Trish turns to Bill and explains, plaintively, that she feels both embarrassed about and undeserving of gifts such as this. She is afraid that people would see her with such things and assume she is showing off. Although she imagines that there are many very beautiful necklaces that she could appreciate, the thought of adorning herself with one of these is simply too much for her. Bill thinks about this for a moment; he says he can understand what she is saying although he feels frustrated by it.

What’s going on here? Perhaps this is simply a difference of opinion about the meaning of gift giving. If so, what makes this interchange, and the many similar ones in Bill and Trish’s marriage, so emotionally loaded? Perhaps the incident is a reflection of Trish’s shame and reluctance to be on display, and/or of Bill’s desire to please and to be regarded as special. If so, is the vignette a kind of hologram that reveals some sort of enduring shape their relationship assumes? Are there particular themes that have a special salience in their relationship, and does
that increase the likelihood of ongoing problems for them?

In the series of previous encounters over this issue, each partner has felt frustrated because they can’t seem to get their point across and can’t feel heard by the other. What have such contentious encounters contributed to the ongoing quality of this relationship? How might my own participation in this latest encounter alter its nature, and could such alteration be therapeutic? There are many questions.

It is clear that there is much more to this transaction than what one might observe as it unfolds. What the therapist thinks this “much more” is depends on his or her theoretical orientation. Said differently, it depends on his or her usual way of making sense of clinical experience. There are of course many ways to interpret the vignette. What follows is a representation of the meaning I give to it, based on my preconceptions, my preferred theoretical outlook, and my particular experience of this couple.

HOPES, FEARS, AND DIFFERING MEANINGS OF INTIMACY

Intersubjective systems theory is a description of subjective experience and its radical embeddedness in the differently organized subjective worlds of others (Stolorow, et. al., 1987). Meaning is relationally constituted and does not arise from any purely intrapsychic process. The intersubjective field so established is fluid, dynamic, evolving, and largely unpredictable. It is co-created by all participants, and since each person’s world of experience is embedded in other worlds — of family, neighborhood, religion, ethnic group, etc. — parsing simple dyadic or triadic interactions limits our understanding. This means, among other things, that Bill and Trish’s encounter might go differently at different times, or with another therapist. The evolving field is not entirely chaotic, however, since a particular developmental history has shaped each participant’s contribution to and expectancies concerning relational interactions. In Dynamic Systems Theory terminology, the emerging field is characterized by certain attractor states
(Thelen & Smith, 1994), or coalescences of certain configurations of meaning. Discerning the historical evolution or the temporal dimension of the couple’s experience and characterizing these attractor states are a part of the therapeutic process. In any encounter, then, the subjective experience of the participants is mutually constitutive. What Trish thinks and feels at any moment in the vignette, for example, is a complex amalgam of her past experience, her current state, and what Bill and I are feeling, thinking, and doing at that moment. Our world of experience is radically embedded in the worlds of others, past and present, in a system of reciprocal mutual influence (Stolorow, et. al., 1992).

The meanings attached to subjective experience form, in aggregate, our sense of reality. The organizing themes and expectancies that characterize experience are referred to by Stolorow, et. al. (1987) as invariant organizing principles, and by Orange as emotional convictions (1995). These convictions take shape developmentally through repetitive interactions with those with whom we have significant affective ties; they are affective themes and are not consciously symbolized in language. Emotional convictions might be considered to be instantiations of implicit relational knowing, as described in such compelling detail by Daniel Stern and the Boston Change Process Study Group (Stern, 2004). Moment-to-moment adaptations to one another’s sensed intentions in the infant-caregiver dyad give rise to expectancies about self and relational experience. The result is an “intuitive sense, based on one’s history, of how to be with another” (Stern, 2004). These expectancies will remain relatively constant, although they are indeed subject to change through new relational experiences, one example of which can be long-term intimate relationships. Another example would be psychotherapy, which typically also includes an attempt to capture emotional convictions in language.

As development proceeds into adulthood, we enter into new relationships with a certain set of expectancies which we can describe loosely as sets of hopes and fears. We have hopes that
we will find such things as affirmation, validation, mirroring, safety, and support, and we have fears that we might, for example, be rejected, hated, or abandoned, or be considered defective or unimportant. The hopes reflect the developmental inclinations toward wholeness, connection, and affirmation that characterize selfobject relations (Kohut, 1982, 1984), or vitalizing experiences (Fosshage, 2005). What was expected, or perhaps could only be longed for in old relationships is hoped for in the new. These forward edge developmental movements described by Kohut and by Marian Tolpin (2005), in which vitalizing self experiences are sought (though not necessarily consciously), and in which one’s strivings for health are expressed, draw us toward intimate relationships. They also are part of what draws us toward psychotherapeutic relationships in times of crisis; a basic element of intersubjectivist sensibility is that clients come seeking growth, health, and wholeness, even though other more negative motivations may also be involved.

Fears concerning new relationships arise out of repetitive developmental experiences of malattunement and empathic failure, and these trailing edge elements can lead to defensive distancing. Any relationship, since it consists of the ongoing interplay of the longings and anxieties of all participants, will inevitably have breaks in empathy — times when one partner is more concerned with self protection, or feels depleted, and has little to offer the other in the way of emotional sustenance or understanding. It would presume an enormous, perhaps even impossible level of emotional security and strength on the other partner’s part to circumvent his or her own negative convictions at such a moment, and therefore to avoid being reactively defensive. In the midst of the vignette, Bill and Trish both feel wounded and are therefore angry and defensive, which is why the encounter comes to an impasse (and why, incidentally, therapeutic attempts at this moment to negotiate about the gift or to explore new patterns of
communication would miss the point). The specific, personal meanings of their injuries, described below, become the subject of their therapy. We will search within each partner's developmental history for an idea of the repetitive themes that this particular encounter seems to have reflected, and that give the dialogue its emotional poignancy. Bill and Trish do not wish to be mean to one another; they both attest to loving one another and to seeking fulfillment in their relationship together. In the moment arrived at in the vignette, it is the experience of hopes threatened and fears confirmed that brings the exchange to an uncomfortable halt.

Because Bill and Trish each have their own sets of hopes and fears about their ability to make secure connections with others, they have concerns about certain things and not about others. Said differently, they each make sense of their experience in ways that may differ from one another. An essential problem highlighted by the vignette is that the gift Bill is offering means something different to him than it does to his wife. There is an intersubjective disjunction (Atwood, et. al., 1989), reflecting the differing perspectives each participant has on the meaning of their encounter.

It is this disjunction that must be dealt with in some way if Bill and Trish are to come to terms with the problem, and with each other. This is a significant difference between intersubjective systems theory and intrapsychic models, which privilege mechanisms seen to operate within the isolated mind of an individual (Stolorow, et.al., 2002). If Bill is angry with Trish, motivational priority is given not to agencies such as aggressive drives or projective identification, but rather to the mutually constituted meanings each partner gives to the other's actions, and the resulting affects. Conflict arises, not within the isolated minds of each partner, but at the interface of the subjective worlds of the participants in such an encounter; its

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5 It should be said that cognitive and behavioral interventions are in no sense discounted by the approach being described here. My belief, though, is that a psychodynamic approach which reduces shame and increases the sense of being heard and accepted will help the receiving and following of instructions to seem much more like a part of a conjoint, hopeful effort to the client, and will therefore increase the chance for success.
wellspring is the urgency to maintain a sense of personal cohesion in the face of a threat to a vitalizing relational tie (Stolorow, et. al., 1987).

I will outline Bill and Trish’s developmental histories in the next section. For now, suffice it to say that Bill’s emotional conviction is that he is only conditionally acceptable. If he can achieve enough, or do enough, or be smart enough, then maybe he will be cherished. He hopes for a secure, unconditional connection, but fears he is unlikable. His gift to Trish is both a sign of the expansive affects related to his accomplishments and an attempt, through this gift, to cement her connection to him.

Trish sees his offer in an entirely different way. She does feel the pressure of Bill’s desire for acceptance. Rather than experiencing it from an other-centered perspective (Fosshage, 1995) as Bill’s neediness, though, she interprets it as a demand for compliance. Trish’s emotional conviction is that she is expected to gratify the wishes of a significant other even at the expense of her own needs. Her experience has been that as she does this, she ends up feeling empty and depleted. Indeed, depression is a significant aspect of Trish’s clinical picture. The gift poses a dilemma: because she does not happen to feel comfortable being adorned with the kind of object Bill is offering, she can either mirror his pride, accept the gift, and end up feeling obliterated, or she can assert her preferences and deal with her guilt, and her anxiety, as she watches him become hurt and angry.

At the same moment, Bill feels Trish’s resistance. He doesn’t perceive this as his partner’s struggle for self-cohesion, though. What he experiences is a sense of rejection, of not being good enough, and he feels a rising anxiety about his ability to maintain a vital connection. When matched with Trish’s rising anxiety about self-loss, any hope of mutual affect regulation vanishes and the encounter erupts in a fight full of the narcissistic rage that typically arises from wounds of this kind.
Epistemologically, this reading of the exchange between Bill and Trish reflects a perspectival realism, as described by Orange (1995). The partners do not share the same sense of reality as they enter into the gift-offering episode. Both partners would agree that Bill has offered a gift, but they have radically different perspectives on what has actually happened there. From Bill’s perspective, the “reality” is that Trish, for possibly selfish reasons, is turning down an offer of his and thereby rejecting a part of him. Trish’s reality is that Bill is trying to make himself feel good, and that he is blind to the fact that he wants her to do something she wouldn’t choose to do. I of course have my own perspective as the therapist involved in the unfolding of this event. In my view both partners are attempting to maintain a vital tie to the other without having to sacrifice a part of themselves, though Bill seems a bit more prone to such self-sacrifice. Am I correct here, because I am the “outside observer” to what Trish and Bill are doing? Are either Bill or Trish correct? Who is right depends on one’s perspective. A fourth observer to the therapeutic encounter might describe it as a system of conflicting goals: Bill is trying to convince Trish to take his gift, Trish is trying to convince Bill that she doesn’t want it (but not necessarily that she doesn’t want him), they are both hoping to convince me that they are right, and I am trying to convince them that they don’t fully understand what is going on and that if they did, it might be easier to solve this problem. From yet another perspective, I might argue that Bill and Trish are simply, for whatever reason, making a mountain out of a molehill and that they need to learn to argue better and get on with their lives. We each have a limited perspective based on a set of emotional convictions that shape our experience; approximations to a larger truth are to be had only by engaging in dialogue about what our experiences are. Like the story of the blind men and the elephant, we get a fuller understanding as we talk. Multiple perspectives combine into a larger picture that can make more sense to all involved. For couples, a commitment to such a dialogue is the foundation of ongoing, vitalizing intimacy and emotional growth. Such a dialogue is also the
foundation of couple therapy.

PAST HISTORY

Encounters such as the one depicted in the vignette happen often in our daily lives with intimate partners, and many outcomes are imaginable. The subject might be dropped, the feelings diminishing either quickly or slowly, and ultimately the encounter might be forgotten or might rise again as background for some future disagreement. Or, an argument could ensue in which past hurts are recounted and attempts are made to blame the other for ongoing difficulties. Of course, if the stronger feelings can be held at bay, some kind of compromise might be negotiated which would allow partners to make a decision and move on. In a stable, ongoing relationship this is probably the most usual course of events. We make do with less than what we would have ideally desired, on the grounds that the relationship itself is important to us and is worthy of preserving. What we feel we needed to say has been said, and perhaps future actions will be different. Frequently they are.

In my role as therapist at this particular moment, I elect not to let matters drop. From my perspective, I see Bill and Trish’s encounter here not just as an attempt to decide about the gift, but also as an attempt to get each other, and me, to hear a message about each one’s experience of the other. I would like to be clearer about what that message is, and how the participants have come to see things as they do. I wonder, as I listen to the exchange, what it is in the history of this relationship and in the history of each partner that gives the interchange its emotional poignancy. This raises the question of their particular developmental histories and the origin and content of the emotional convictions that theme their experience of one another. What, in Daniel Stern’s terminology, has led to their differing forms of implicit relational knowing?

What follows is an unavoidably schematic and selective abstract of Bill and Trish's individual histories. It is meant nevertheless to be illustrative of the direction of the therapeutic
Bill grew up in a middle-class family. In therapy, he recounts his experience of that part of his life. His father worked, his mother was a homemaker, and Bill and his two sisters were bright, active children. Dad was a perfectionist who could be very demanding, and demeaning. He expected a great deal of Bill, perhaps as a male, though his standards were quite high concerning the list of duties everyone was expected to perform. Bill, it seemed, could never be good enough. Each time he did a chore, his father would find some flaw and insist that it be done over. Bill and one of his sisters struggled constantly to do things in ways that would earn dad’s recognition, if not praise. The other sister was in an endless state of rebellion against her father’s tyranny and the two of them constantly fought. Bill and this sister thus had developed two different ways of adapting to their relational milieu.

Bill pushed himself to excel at school and on the athletic field. He was bright and talented, which helped with his success. He was also harsh and judgmental when others would not perform to his expectations. He became a perfectionist, but not because he was copying his father. Reflecting a common dynamic in the origins of perfectionism (Greenspon, 2000, 2007), Bill’s emotional conviction was that if he could be perfect, he could perhaps finally be certain of the sustaining ties he needed and wanted with his father. A teammate or classmate who performed less well on something Bill was involved in threatened Bill’s hoped-for perfection and therefore his sense of cohesion and self-identity. Needless to say, Bill was not well-liked by his peers. They accepted him because he was pleasant and outgoing, but Bill had the constant feeling that no one really wanted to be with him. It was a vicious irony: the more Bill did what he felt would make people like him, the more he turned them off. The exchange with Trish over the gift thus had a long history in terms of both the behavioral enactments and the meanings Bill ascribed to the outcome. Here was one more case in which Bill went all-out to do something good and pleasing,
and yet he found himself rejected as a result.

Trish came from a large family. Dad was a reasonably successful architect and mom was a homemaker for him and their seven children. Recounting her experience of her childhood, Trish explains that dad was also an active alcoholic, frequently angry though not violent. Mom experienced bouts of depression which, because she would spend large amounts of time in bed, left the children in charge of the home. Trish was dad’s favorite (she was one of two girls); he would often insist that she keep him company in the evening while he, drink in hand, paid bills, read a book in the den, or did some minor household repair. She was to sit quietly and wait to see if he needed anything. This special relationship was a source of both jealousy and relief to the other siblings (and to Trish’s mother). Trish was the one who could typically manage dad’s anger, at least before it exploded, so she was the designated point-person when dad needed to be asked about something. In the face of her developmental strivings to maintain needed vitalizing ties, Trish learned to set aside her own feelings. She never learned to name and deal with her anger; it was hard for her even to capture her experience of it. Trish’s dilemma was that doing her father’s bidding, to maintain needed ties with him, left her without affirmation of her own emotions and therefore empty and with a compromised sense of self definition.

Trish’s experience illustrates a point about the radical contextualism of intersubjective systems theory. It can be argued that since any feelings Trish might otherwise have experienced as anger went ignored and unprocessed, they ultimately became a part of the unvalidated unconscious described by Stolorow and Atwood (1992). These affects went not only unsymbolized (no words were learned to describe them), but also emotionally unprocessed, so that they would remain inchoate and beyond recognition. Our ability to experience affects at all is shaped by the level of attunement or malattunement we experience in significant relationships during development. Selfobject functions, in this view, reflect the integration of affect into
ongoing self experience, through the co-constructed outcomes of, for example, the affirmation of expansive affects and the provision of a safe milieu for painful affects. (Stolorow, et. al., 1987)

The developmental histories described here were foundational for the subjective worlds of experience Bill and Trish brought to one another on their first meeting. As in all relationships, a slow dance began at that time (about 25 years earlier), in which countless movements, words, inflections, and rhythms formed a relational prosody that began to take on idiosyncratic meanings. These are the local-level actions, in the language of the Boston Change Process Study Group (Stern, 2004), that take place as people learn how to be with one another, whether as parent and child, therapist and client, or as lovers. Each partner’s version of implicit relational knowing, honed during their previous development, is in play as the partners form a bond. The back-and-forth of action, interpretation, and reaction, the overwhelming majority of which occurs at a non-conscious, implicit level, forges the bond and gives it its character. The process is “sloppy” (Stern, 2004). Mistakes are made and corrected, or skipped over and let go, or seized on and processed well or poorly. The temporal dimension is important here. Single moments in an encounter can be determinative but rarely are because of the ongoing intersubjective flow of adjustment and readjustment. The character of a relationship emerges over time and has inconsistencies and surprises at any one moment. Bill’s original desire to please seemed to reassure Trish that he would not demand gratification at her expense. At the same time, Trish’s more relaxed playfulness, her evident desire to be with Bill, and her professed admiration of his accomplishments reassured Bill that he was desired. Those were the positive themes in their relationship that each one sensed and that helped to weave the fabric uniting them. There were other, darker elements as well, which because they later came to the foreground threatened this bond.

The history of relationship problems is always complex and multiply determined. Both
parties play a role. Bill and Trish came to see me because their marriage was fraying. There was more distance between them, including a declining sexual intimacy, and there was evident anger. Bill in his perfectionism was chronically judgmental of their children. Trish felt trapped in the middle of this; she needed to protect their children from rages like those of her father, and for this she risked incurring Bill’s wrath herself. Bill felt more abandoned and unwanted — his old familiar universe — and Trish felt more pressure to conform to Bill’s wishes regardless of the expense to her (or their children). In self psychological terms, these developments reflect the trailing edge, repetitive aspects of transference meanings for each partner (Stolorow, et. al., 1987). In the intersubjective systems view of this, transference is co-constructed. What transpires in an encounter between partners (or between patient and analyst) is an emergent property of a system, not simply the reaction of one person to something happening within the other. In the intersubjective field in which Bill was feeling increasingly isolated and desperate, while Trish struggled with feelings of obliteration, the atmosphere was that of increasing anger, increasing anxiety, and declining hope. While the developmental longings of these particular partners seemed at one time capable of being mutually met, this darker side of intimacy born of lapses in attunement and defensive wounding, this evolving mutual confirmation of long-held negative emotional convictions, was tearing them apart. Each partner’s defensive struggle to reduce his or her own anxiety at not finding what they wanted only increased the anxiety of the other, and they were ending up with what Ringstrom evocatively describes as a “circularly causal linkage of failed selfobject functions” (1994, p. 166).

The sexual difficulties Bill and Trish were experiencing when they came to therapy provide a concrete illustration of co-constructed experience at the interface of two subjective worlds. Trish had become less interested in sex over time, and Bill had begun to comment about it in typically terse and irritated tones. When they did have sex, it almost always followed an
evening in which Trish had been drinking wine; at those times she would become a passionate “tiger” (Bill’s term), and would seem consumed by the experience although not necessarily attentive to Bill.

Sex is perhaps the one part of an ongoing intimate relationship in which it becomes evident that mutual affect attunement significantly heightens the experience. One’s own pleasure is intensified by pleasuring one’s partner. At its best, with both partners relaxed, sex becomes a form of mutually attentive play. Sexual difficulties, whether they involve physical problems or not, arise from perturbations in this profound intersubjective conjunction. Sexual desire can easily be interpreted as a demand, and indeed as a sexual relationship becomes more strained there can be more demands. For Bill, sex is a confirmation of his desirability; conversely, sexual restraint on Trish’s part leaves Bill feeling once again unlikable. For Trish, who was never schooled in mutuality and regard for one another’s needs in a relationship, attending to Bill’s sexual needs raised the specter of disregarding her own. Experiencing her own intense desires smacked of selfishness and interpersonal danger. She would risk desire only if she could medicate away the attendant feelings. Without the capacity for dialogue and an understanding of what was emotionally at stake here, Bill and Trish’s sexual relationship had become frozen into a ritualized dance that threatened to widen the gulf between them.

**DESIRE AND VULNERABILITY: THE DILEMMA OF INTIMACY**

A hallmark of normal human experience is an ongoing sense of meaningfulness. We make sense of our world, and we act accordingly. Two aspects of this meaningfulness are a sense of self-cohesion and a sense of connection to others. Kohut viewed our need for secure selfobject ties as the psychological equivalent of our biological need for oxygen, and he emphasized that this is not something we mature out of (Kohut, 1984). It is possible to derive from this a positive and hopeful view both of intimacy and of couple therapy: relationships are vital to us and we seek
to preserve them, so partnering is desirable (though not absolutely necessary, since non-intimate relationships can be sustaining), and a couple’s motivation for therapeutic growth and more secure connection is always there, though not always enacted. In the theoretical framework being described here, the anger and pain Bill and Trish experience are not seen as reflections of innate aggressive impulses, nor are they described in terms of a sadomasochistic tangle. Rather, they are viewed as defensive reactions to, and cries of protest against, the frustrated and (yet again) thwarted developmental longings arising in the context of the relationship. Their desires for affirmation and connection leave them vulnerable to disappointment and hurt.

Intimacy evolves in a sometimes ungainly fashion out of the interplay between these developmental longings and our reactive defensiveness to the perceived slights and empathic breaks that we experience as repetitive trauma. Intimacy is risk, in so many ways. Becoming attached to another person carries the immediate risk of loss, of course. Allowing ourselves to be open enough to authentically express desire for our partner implies great vulnerability to rejection or judgment. To Stephen Mitchell (2001), such ongoing threat of vulnerability leads to a defensive, and preservative, emotional dullness in continuing intimate relationships. Accordingly, a marriage is preserved in part because love loses its initial exhilarating highs and precipitous lows, and thereby runs less risk of sundering. To the contrary, Virginia Goldner (2004) has expressed the view that the danger and the hopeful excitement involved in being vulnerable, in the context of an ongoing relationship in which safety has been authentically if not continuously felt, in many ways enlivens and vitalizes long-term intimacy. As I view it, a source of strength in long-term relationships is the ability of each partner to express what they desire, to hear “yes” or “no” in response, and to deal together with the emotional result. Risk and resolution, and dialogue — these can be the keys to vitalizing, deepening relationships. The more we begin to realize what is at stake emotionally for our partner as he or she responds to us, the more sophisticated we
become at the interplay of open vulnerability and reassurances of safety. With trustworthy assurances of safety, the emotional stakes begin to change, and intimacy becomes enriched. To use another metaphor, the more the defensive walls come down, the closer we can be to one another.

Emotionally cooler or more placid relationships can indeed endure and can even be comfortable and acceptable, but we cannot conclude from this that long-term intimate relationships survive because of this placid state. Relationships in which both partners have felt safe enough to risk emotional vulnerability will potentially contain more heat and more depth, and can endure and even grow precisely because of this. As Bill and Trish work to envision, and then accept, their differing desires for the relationship, they can begin to feel more secure about their importance to one another. The mutual validation of their desires can mean not only that they feel affirmed, but that they can begin to imagine growing and changing.

COUPLE THERAPY

Where does all of this lead us clinically?

Intersubjective systems theory does not involve a technique or a set of steps to follow in diagnosing and treating emotional difficulties, although the framework does suggest certain things to be attended to as elements of practice. Ringstrom has written concisely about such priorities (1994). An intersubjective systems sensibility suggests, rather, a particular way of making sense of clinical encounters. Since it is concerned with idiosyncratic meanings that arise in certain contexts, the theory does not generate universal guidelines for what to do when certain things are observed. It all depends on what sense clients are making of their experience; their intentions in any relational encounter will be based on these meanings. In my work with Bill and Trish we of course have an overall sense of direction — they have come to see if they can resolve their problems and build a more vitalizing relationship — and we have a sense of hope, but not a
specific roadmap since we can’t predict what will occur as the work proceeds. We have, because I have inquired about it, an understanding that the relationship is important to both partners and that they would like to preserve it. Neither partner is thinking of leaving. As we come to the end of the events described in the vignette, I decide to talk with Bill and Trish about what might be happening to them emotionally and why they might feel the way they do. We have covered similar ground earlier in their therapy, so I am wondering out loud about a thread that connects to their developmental histories and we have begun to imagine how the emotional convictions outlined before might be in play. In this session, the encounter arises spontaneously and it gives us an opportunity to ask the question this paper asks: “What is going on here?” The result is a still further deepening of our understanding of what is at stake for each partner, how they each understand the encounter, and how an intersubjective disjunction has led to anger and a collapse of effort toward resolution of the impasse. I explore with them my understanding of the encounter as an instantiation of their intersubjectively constituted emotional convictions, or of the intertwining of their particular brands of implicit relational knowing.

I am a part of this picture, not simply an observer. My choice to focus on describing the emotional convictions in play, and my particular understanding of these convictions, plays a major role in how the session goes. In the transaction with Bill over the gift, for example, Trish’s resistance seemed to me to be a vitalizing attempt at self-coherence, even at the risk of Bill’s anger. It is likely that my own affective attunement to Trish, primarily evident in my purposefully listening to her, facilitated this.

Each partner’s understanding that they are exploring an emotional issue in front of an audience, and my own convictions regarding the usefulness of maintaining a reasonably calm and reflective atmosphere, help to lead the dialogue into deeper and more meaningful areas. Other players would make for different games.
I could choose instead, in this session, to help the couple make a decision about the gift and perhaps to agree to a rule about such offers in the future. If this were to be done successfully, it might have the additional advantage of giving the couple a positive experience of working through a problem and feeling like a team. My intersubjectivist sensibility calls my attention, though, to each partner’s experience of such a dialogue. With the particular set of emotional convictions in play, a conversation about compromises and about the necessity of understanding the other partner’s point of view might easily inflame the repetitive aspects of the transference meanings here. Bill might once again conclude that his idea is not good enough, whereas Trish might feel obliged to focus, once again, on her partner’s needs at the expense of her own. I would end up enlivening the very issues we would need to be focussing on in therapy. Not a bad thing, necessarily, but if left unattended such events can easily derail the intended therapeutic process.

As a corollary to this, I am not the expert arbiter of an objective reality (whether or not the gift is a good idea, for example), and I am not in a contest with my clients to get them to see something they are defensively blind to, such as intrapsychic defenses or interpersonal games they might be playing. We are engaged instead in a conjoint exploration, looking for what makes sense to all of us concerning what the problem is and what to do about it. This is what Donna Orange describes as a “relentless desire to accompany and to understand” (2006). We begin with the task of holding two “truths” — Bill’s and Trish’s — simultaneously, and we move toward some larger perspective based on a dialogue, or perhaps more appropriately a trialogue. In accord with my experience working with both individuals and couples, I may be able to make suggestions and advance our understanding of the problems more quickly than they would be able to on their own, but I realize that a different therapist, even one with my theoretical point of view, might have different insights which could turn out to be equally helpful. I “hold my theories lightly” (Orange, 1995); in a tradition of fallibilism, I realize that my view of the
operative organizing principles and intersubjective field might be highly reasonable and succinct, yet completely wrong in this instance. That is, it may not adequately reflect the dynamics of this encounter or these participants' experiences. Perhaps, for example, Trish does not have the emotional conviction that she must sacrifice her own desires to satisfy those of an important attachment figure. Given the same developmental history, perhaps she has concluded that she is a common object of jealousy and anger and so is reluctant to call attention to herself. This might make perfect sense — might be "true" for someone else with her experience — so a part of therapy is a process of confirming or disconfirming reasonable guesses. How does a particular explanation fit, to her way of thinking? Does it go along with other things we have learned about her, and does it help explain significant elements of her life? Does it make sense in a helpful way? Is there an emotional resonance, and a sense of being understood, that helps open up space for change? A spirit of fallibilism and a willingness to investigate how our experience-near interpretations fit for our clients helps us to avoid a kind of therapeutic perfectionism (and the therapist's attendant anxiety), where we exert ourselves to arrive at the precisely correct interpretation at the precisely correct moment.

Just as the therapist is not the final authority on the "reality" of the relationship, neither is one partner or the other (Ringstrom, 1998). The issue is never "who is right?" Is the gift Bill offers too ostentatious? Is Trish being too negative and ungrateful? There can't be a single correct answer to questions such as these, since it depends on one's point of view. The therapeutic issue is not how to decide who has the correct position, but rather to discover why it has become an issue at all, and what makes resolution so elusive. This is why such seemingly small topics as the gift question are rarely trivial. As we all begin to realize what is at stake emotionally in this encounter — self cohesion and a sense of safety, for example — we also begin to see how such a seemingly small matter looms so large.
There are many paths beyond moments such as these in a relationship. One of these paths involves both a purposeful moderation of defensive feelings and an attunement to the other person’s perspective. The emotional vulnerability generated by such intent means that it requires a kind of courage, especially since it threatens to re-enliven negative organizing principles. In themselves, such decisions are not a way of solving the problem at hand, though they may set the stage for that; rather, they allow for a new experience of the relationship. If Bill can foreground, for example, Trish’s fears about the gift rather than her judgments of him, then the groundwork is laid for a more compassionate responsiveness. Similarly, if Trish can understand something different about the wellspring of Bill’s desire — that it is a way of feeling successful and wanted, and not, to him, a way of asserting his self importance — then she too might feel less defensive. The flare-up between them has resulted from differing perspectives on the meaning of the offer. There is an intersubjective disjunction. By the time the therapy session occurs, this disjunction has led to wounded feelings and defensive judgments. Bill now is pressuring Trish to accept his desire, and Trish is judging Bill for this pressure. There is a fight underway, and it is not simply a fight for control. “Control issues” are indicative of underlying anxiety and defensive self protection. The argument is a sign of each partner’s anxiety and disappointment in their struggle for affirmation, connection, and self cohesion. Because this struggle has a long history in their relationship, once the fight is underway both partners react to the other’s anger rather than to any hurt or vulnerable feelings that may be in play. Frequently their anger has been laced with contempt, and the resulting wounds have been especially corrosive to the relationship (Gottman, 1999). If the primary goal of couple therapy is to find less troubling and more enriching paths to intimacy, and more resilience, a frequently necessary companion goal is the healing of past hurts.

THE FABRIC OF COUPLE THERAPY
Addressing an intersubjective disjunction between partners involves the establishment of an atmosphere in which both emotional vulnerability and heightened awareness are possible. As therapy proceeds, two things are happening: the relationship is coming to have new meanings for each partner, and the affective bond between them is changing. The fabric of intimacy is being rewoven. As Bill and Trish begin to reflectively comprehend the emotional convictions which organize their experience of one another, the possibility for greater mutual empathy opens up. They recognize that they may see the same event differently, and that each partner is motivated to maintain a sense of self coherence or integrity. They begin to comprehend and take into account each other’s narcissistic vulnerability (Leone, 2006), that is, the threat to each one’s sense of self cohesion. They begin also to comprehend and to accept the validity of each other’s desires for acceptance and affirmation — their selfobject longings (Ringstrom, 1998). Slowly and perhaps haltingly, the partners work out a different way of being with one another.

At the same time, the emerging spirit of joint exploration and hopefulness helps each partner to feel they are being taken seriously. Feeling important to someone and feeling understood form a foundation for a vitalizing intimacy and for improvements in the sense of self coherence, self regulation, and self esteem. The experience of self acceptance and acceptance by another, formed as it is from the experience of affirmation and validation, creates a springboard for individual and conjoint emotional growth. Decreasing anxiety and an increasing sense of safety open the way for greater self and mutual affect regulation, and also for greater reflective self awareness. Partners become better able to tolerate the affective disruptions that flow from the inevitable disagreements which occur in ongoing relationships.

My own thoughts about the significant emotional convictions in play, proffered to this couple, are added to the fabric that is emerging. As explanations, they will hopefully help illuminate what is happening in the gift encounter from each person’s point of view. At the same
time, the proffer itself is a relational act. My willingness to understand and to undergo the situation with my clients (Orange, 1995) contributes to each partner’s sense of being valued and enhances the hopefulness of our shared quest. My focus in this therapeutic process is on “... the healing power of sustained, ongoing, attuned mutual regulation ... that over time builds a trustworthy relational vessel capable of weathering the inevitable storms at sea” (Shumsky & Orange, in press).

If the therapist finds it possible to be affectively attuned to each partner (separate from whether the therapist agrees with that partner on some particular issue), then the possibility opens up that the partners, experiencing this, can find greater attunement to one another without each feeling that they must simply give in to the other’s reality. In successful individual therapy, the client’s movement is toward greater affect integration. This is accomplished, in the context of a trusting and affirming therapeutic bond, through a sense of common exploration of the client’s world of experience, and through the therapist’s attunement. The result of this process has been called a “developmental second chance” (Orange, 1995, p. 26). The fine tendrils of the forward edge movement toward growth (Tolpin, 2002, 2005) are nourished. In couple therapy, the addition to the therapeutic space of an increasingly attuned partner can powerfully enhance this growth because of the co-construction of a mutually sustaining partnership that is present in real time outside the therapeutic session.

Because I tend to privilege explorations of the developmental origins of emotional convictions that shape each partner’s experience, I have occasionally described my practice with couples as a kind of conjoint individual therapy. I will sometimes pay particular attention to one partner or the other, following a particular experiential thread or line of reasoning (occasionally I will do this without the other partner present, if it results in more candor and does not entail potentially destructive secrets). In some sense, though, the distinction between individual and
relationship therapy is simply an administrative one. The intersubjective field co-created within the consulting room is comprised of the worlds of experience of all the participants; in individual therapy the client cannot be decontextualized and treated as though an absent partner does not exist. In couple work, the physical presence of a partner increases the complexity of the field but it also significantly expands the possibilities for dialogue and relatedness, and thus for the mutual understanding and affect attunement that form the fabric of ongoing intimacy.

REFERENCES


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