
An Application of Pragmatic/ Experiential Therapy for Couples

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It was a Sunday afternoon. Joe had run some errands while Tracy was at home getting some things done around the house. When Joe got home, he talked casually about his purchases—household supplies and groceries. As he talked, Tracy's face flushed and she began what Joe later described as "the interrogation." The conversation was no longer casual. "Why didn't you pick up the mulch?" Tracy's tone was accusatory. "You said you were going to do the flowerbeds this weekend!" The truth was that Joe had forgotten. He responded, "Look, it's not that big of a deal. I'll just get it later." Tracy wasn't about to let up. "You never care about *anything*! Everything that's important to me is 'no big deal' to you!" Joe snapped back, "You know what? I can't go on like this!" Tracy's response was immediate. "Yeah, well, maybe you shouldn't!" After a moment of silence, Joe turned around and walked out. In the past three years, arguments like these had become more frequent and intense, with this one being the worst to date. That night they actually scared themselves, and decided to get marriage counseling.

Joe and Tracy had been married for six years. They'd met at a party, felt an immediate connection, and talked the whole night. Things went smoothly until the third year of marriage, when Joe lost his job and ended up with a lower-paying position. Joe and Tracy both wanted children, but kept putting it off because of the increasing conflict and decreasing connection with one another.

At the end of the first session, the therapist (PW) briefly described to Joe and Tracy the approach he would be using with them. Over the past two decades, with the help of the colleagues at the Couples Research Institute, an approach for improving relationships—pragmatic/experiential therapy for couples (PET-C)—has been developed. Detailed in the book, *Emotional Intelligence in Couples Therapy* (Atkinson, 2005a), PET-C translates recent advances in neurobiology and the science of intimate relationships into practical strategies for improving relationships. Through a series of landmark studies, researchers have identified exactly what people who succeed in intimate relationships do differently than those who fail. One of the most important differences involves how people react when they feel upset. All partners in long-term relationships feel upset with each other at various times. Evidence suggests that some people know how to handle such moments in ways that cultivate respectfulness and receptivity in their partners. Others react in ways that make it almost impossible for their partners to genuinely care. Studies suggest that the ability to react effectively

when feeling upset is not optional. It's a *must* for anyone who hopes to have a satisfying intimate relationship.

The PET-C therapist begins by identifying the specific ways each partner has been failing to react effectively when feeling upset. Then, using a series of powerful methods to cultivate receptivity, the therapist challenges each partner with the following logic: "If you want to be treated well by your partner, you need to learn to think and act like people who almost always get treated well, and you certainly don't want to be thinking and acting like people who almost never get treated well." The therapist paints a clear picture for each partner of the kind of changes in his/her typical ways of reacting during upsets that are needed. As each partner gains a better understanding of how his/her own habits have contributed to the depleted condition of the relationship, the therapist helps each accept mutual responsibility while in the presence of the other. Old wounds are healed as the therapist helps partners avoid blame and defensiveness while engaging in conversations about past hurts.

Healing conversations alone aren't usually sufficient to enable partners to escape the pull of ineffective habits that have been in place for years. Using a combination of individual and conjoint sessions, the therapist helps each partner develop the ability to think and react more flexibly when upset feelings occur in the present. Partners become expert at recognizing when their own thoughts and actions during upsetting situations are predictive of relationship failure, and they begin to understand how and when they need to think and act differently. But knowledge usually isn't enough. "Knowing it" and "doing it" are two different things. Recent brain studies suggest that old patterns of thinking and reacting die hard because they're often woven into the fabric of powerful internal states that are automatically activated when upsets happen (Atkinson, 1999; Panksepp, 1998). The therapist helps each partner identify internal states that perpetuate outmoded thoughts, attitudes, and actions, and "rewire" these states for more flexibility.

As partners learn to manage their differences more respectfully, attention shifts to increasing feelings of tenderness, sexual interest, playfulness, and the desire for other satisfying forms of connection. Recent studies suggest that the secret to cultivating intimacy has to do with figuring out how to "turn on" the brain's intrinsic motivational states that generate feelings related to intimacy. The PET-C therapist helps partners identify attitudes, beliefs, and habits that inhibit or block intimacy-related feelings, and establish routines and practices that maximize the chances such feelings will spontaneously arise (Atkinson, 2002, 2010a).

Case Study

Treatment Process: Early Phase

Assessment and Case Conceptualization

During the assessment phase, the therapist obtained information regarding the extent to which Joe and Tracy were demonstrating attitudes and actions that are necessary for relationships to succeed. One of the most important findings made by marriage researchers is that, the majority of the time, when partners get upset with each other,

none of their expectations or priorities are out of line. There are many different ways of navigating life that can work in relationships, and people start a downhill slide when they assume that their priorities or opinions are better than their partner's.

People often fail to recognize the validity of their partner's priorities or patterns of conduct because their nervous systems are wired differently, so that the very same conditions that are calming to one person can raise the anxiety of another person. When the partner's actions generate anxiety in the other, it is natural to (mistakenly) conclude that the partner is doing something wrong. People in successful relationships avoid this mistake. They recognize that just because they might not like the way their partners are acting does not necessarily mean that their partners are doing anything wrong. Rather than insisting that their partners change, they ask their partners to "meet in the middle," and they demonstrate willingness to do the same.

Most of Tracy and Joe's arguments stemmed from an inability to come to terms with the fact that they had legitimately different ways of maintaining emotional stability. Tracy was the type of person who felt better when she got her work done first, and then relaxed afterward. For her, work was work; it didn't have to be fun. It's just something that you have to do—like it or not. In fact, she found it difficult to relax and enjoy herself when important tasks were looming overhead. She felt more stable when she stayed on top of her responsibilities. Tracy was also calmed by predictability. She did best when she was able to organize life so that she could know what to expect. She liked to have all her ducks in a row. She prepared for life's challenges, leaving little to chance. This level of structure made Joe anxious. He felt best when life was full of novelty and variety, and he became restless if life became too routine or predictable. He thrived on the unexpected and specialized in improvising with life's unpredictable turns. He also felt best when he was enjoying each moment, rather than constantly planning for the next thing. He reasoned that there will always be more work to do, and if you wait to enjoy life until all the work is done, life will pass by while you have your nose to the grindstone.

Tracy lamented, "I wanted a partner who could delay gratification and work as a team. I thought I had that with Joe at first. But I am coming to realize that he doesn't have structure or discipline. In fact, his priorities are screwed up! He will just go off and buy something on a whim and have no consideration for the budget I have put together. He is careless when it comes to making decisions, especially with purchases."

When the therapist asked Joe about his ideal marriage, he said, "Well, I guess I want it to be something like my parents'—value one another and have faith that your partner is an adult and can make good decisions. I don't get that in my relationship from Tracy." Joe confided that he saw Tracy as overly controlling and needlessly concerned with budget, deadlines, and planning. Joe explained, "If Tracy just understood me, valued and had faith in me, then we wouldn't be here. She would see that my intentions and judgments are good and there would be no reason to get upset with me."

These comments and others revealed that each partner believed that the other was the main cause of their relationship problems. Tracy felt that their problems stemmed from Joe's selfishness and irresponsibility. Joe felt that Tracy caused their problems by being unreasonable and controlling. The contempt they each felt coming from the other resulted in each of them digging in their heels, defending their priorities, and refusing to budge an inch. They became increasingly polarized in their differences, to the point of appearing extreme in their respective ways of prioritizing and maintaining

emotional stability. The therapist knew that if their relationship was going to improve, each of them would need to come to recognize the legitimacy of the other's way of navigating life, drop the critical attitude, and become willing to work toward solutions that took both of their needs into account.

Treatment Process: Middle Phase

Phase 1

The therapist chose to meet separately with each partner, beginning with Joe. He prepared himself for the road ahead, knowing that what he was about to share with Joe might be a rude awakening for him. He anticipated that Joe might become defensive, challenge the therapist, shut down, and possibly get angry with the therapist. It would be crucial for him to be in a relaxed state of mind and not take Joe's reactions personally. He began the meeting with Joe—light, playful, and with a little bit of humor. Even though the therapist was going to be challenging him throughout the session, he knew he needed to be patient and relaxed.

After a few minutes of small talk, he began. "I know you can't continue to go on with the way things have been going between you and Tracy." Joe nodded and the therapist continued, "You need for her to care about your feelings and have a better understanding of you. You want to feel respected that you are an independent person capable of making good decisions and that you want to be valued in the relationship. I don't think Tracy is hearing you or seeing things from your perspective." Joe responded, "No, she is not ... not at all." The therapist continued. "So the question in my mind, Joe, is: Why is this happening? Why can't she respect your way of doing things? I know you've been saying it's because she's controlling—and you know that you're not like that. You're much more accepting by nature than she is, right?" Joe nodded. "So what makes it seem like the main problem is Tracy's attitude." Again, Joe nodded, and the therapist continued, "I can see how you have come to that conclusion, Joe. But here's the problem: Your attitude about this is no secret to Tracy, and it's been quite offensive to her over the years, and I believe it's an important part of the reason she's had little motivation to care about your feelings and opinions." Joe looked confused. The therapist continued, "Joe, I think you have some legitimate complaints about Tracy, and I won't be satisfied until you feel more respected by her. I'm just saying that the attitude you've had toward Tracy has likely played a big role in shutting down her receptivity and ability to care about how you feel." Joe seemed annoyed with that statement. "Well if she wasn't controlling, then I wouldn't have the attitude! She starts all of our fights. She can't accept me for who I am." The therapist nodded and explained, "Joe, I know Tracy has some bad habits in this relationship, but it seems to me you have some habits that are just as destructive as hers." Joe looked at me with shock and disbelief. "You're kidding, right?"

At that moment the therapist recognized that he had triggered a self-protective mechanism in Joe's brain. He knew that it would be difficult to explain his logic to him because the logical part of his brain would be unavailable as long as this self-protective state was up and running. His brain was occupied with the process of scanning the therapist's face, body language, and attitude. Any sign of frustration, irritation, or defensiveness on the therapist's part would further intensify Joe's self-protective

instincts. For a brief moment, the therapist turned inward and checked to be sure that he was in a good frame of mind to continue. "Joe, you are probably thinking I am off my rocker, and if I were you, I might have the same reaction. I'll answer your question, but before I tell you my thoughts, I want you to know that I don't expect you to buy what I am suggesting if it doesn't make sense to you. If I was in your shoes and someone was telling me to try something on to see how it fits, I wouldn't wear it unless it fit. I want you to have that same freedom, okay?"

Joe responded, "I appreciate your professionalism and I trust your judgment. I know you are trying to help me." Joe seemed genuine and receptive, whereas moments before he was decidedly not. It is this author's experience that when he is able to drop his agenda temporarily and engage in receptivity-cultivating methods (Atkinson, 2010b), clients usually become less defensive, even when one may be saying things that are hard for them to hear.

Joe was waiting for an explanation. The therapist began, "Joe, it looks to me that you're making two critical relationship mistakes. It's not like you invented them ... they've been around a long time, and most of us make these mistakes from time to time. But if you commit them regularly—and I think you have—they'll increase the odds that Tracy will disregard your feelings, and eventually, they'll sink your relationship." Frowning, Joe said, "Well, what are they?" The therapist spent the remainder of the session explaining. First, he discussed Joe's tendency to conclude that there was something wrong with Tracy's expectations much of the time. Rather than seeing them as legitimate, but different than his, he dismissed them as excessive, even neurotic. He told Joe that he believed Tracy had sensed this dismissive attitude from him for years, and it had needlessly created ill will in her toward him. More importantly, he argued that there was not anything necessarily wrong with Tracy's expectations. He proposed that there were plenty of people who were wired like Tracy, and they would have no problem doing the things she asked Joe to do. He was quick to add that there are also plenty of other people who *would* have a problem with them, and just because there might not be anything wrong with her expectations didn't mean he had to blindly accept them.

Joe's second mistake was his "I'm not doing anything wrong so get off my back" attitude. Because he usually saw Tracy's requests as unreasonable or excessive, Joe often failed to accommodate to them *at all*. Rather than asking her to meet in the middle, he insisted that she back off and drop her requests for him to change.

Joe didn't necessarily like what the therapist was saying, but Joe was interested as the therapist described how people who are good at getting their partners to care about how they feel handle situations like his. He explained that just because there might not be anything wrong with Tracy's expectations didn't mean that there was something wrong with his. Nobody has to be right or wrong. He suggested that in trying to stand up for himself, he often overshot his goal by putting Tracy down. Most important, he began to paint a clear picture of how he could stand up for himself better when she criticized him. Instead of arguing that there was something wrong with her expectations, he could acknowledge them as legitimate and offer to try to find ways to accommodate them while at the same time letting her know that he **believed** his viewpoints were legitimate too, and that he needed for her to be willing to **give** and take as well.

The therapist could tell that his words were making sense to Joe, and that he was interested in trying to do what he was describing. He told him that, first, he would need to take steps to undo the damage that he had done by acting as if Tracy's unreasonable expectations were the main cause of their problems. He asked Joe to write Tracy a letter formally releasing her from the role of villain in the history of their relationship. He clarified, "In this letter, I'd like you to present a compelling case for why your previous belief that she was the bad guy in the story of your relationship wasn't fair. Assure her that you're going to try to understand her better and keep a more balanced perspective in the future." The therapist gave him written guidelines and sent him home.

While the therapist was working individually with Joe, he was having parallel sessions with Tracy. Tracy had believed that Joe was careless and irresponsible, and that this was the main cause of their relationship problems. Tracy's judgmental attitude was putting a choke hold on their relationship just as surely as Joe's. Across three sessions, this approach with Tracy was nearly identical to the way it was approached with Joe—weaving together direct challenges with ways of interacting with her that helped her stay open to what the therapist was saying. Tracy was having a difficult time dropping her judgment because she felt that the therapist was saying that if she dropped the idea that he was irresponsible, she had to let Joe do whatever he wanted. The therapist assured her that he believed there was a way to drop her judgment of Joe and still require that he give equal consideration to what she wanted. Tracy responded, "Well, I am dying to hear this one because I haven't found that trick yet." The therapist explained, "Because Joe feels criticized, he has a hard time caring about your feelings. You owe it to yourself to see how he would respond to you if he didn't constantly feel you judging him as irresponsible." As the therapist had done with Joe, he encouraged Tracy to consider that Joe's values and priorities weren't wrong; they were just different than hers, and that as long as she believed that hers were better than his, it would be normal for him to dismiss her as excessive.

This was brand new information for Tracy. Prior to the meetings with the therapist, she thought she had tried everything to get Joe to change. This new perspective made it easier for her to consider dropping her judgment of him without feeling like she was letting him off the hook. Just as the therapist had done with Joe, he proposed to Tracy that she write a letter releasing Joe from the role of villain.

It wasn't until the tenth therapy session that Joe and Tracy read their letters to each other. Until then, the therapist and the couple had met together only once—in the first session. The climate in the room was very different than it was in that initial session. Even though there had only been one conjoint meeting, relationship changes had already taken place. Tracy's face looked softer, and Joe was making more eye contact with her.

Instead of reading their letters, they decided to talk directly to each other, occasionally glancing down at their letters for guidance. Tracy began, "This isn't easy for me, but I feel like I owe you an apology." She quickly added, "I mean, I don't think I'm the only one who probably needs to apologize, but I guess I'm just beginning to realize that I do. I'm seeing through these sessions with Paul that my judgments of you haven't exactly been fair. For years, I've felt you to be careless and irresponsible, and that made it easy to not think about your feelings. In fact, I didn't see you as having feelings. I was just seeing you as the bad guy. Paul has helped me see that there

are plenty of happily married people who aren't as concerned about finances as I am, and that there really isn't anything wrong with your attitude ... it just scares me. It's foreign to me. I realize now that I wasn't showing you my fear and worry; I was just showing you anger and blame. I haven't been respecting your opinions; I've just wanted to change them. I'm going to shift from trying to change you to just asking you to be willing to meet in the middle. I have to admit, I still am not clear what your philosophy is regarding spending, but I want to know so we can work together."

Joe reached over and grabbed Tracy's hand. He spoke softly. "I haven't been treating you well either. I've been doing the same thing to you. When I've felt your expectations were unnecessary, I've acted like you should just let me be and accept the way I do things. Paul has helped me see that this attitude doesn't work in any marriage, and that just because there might not be anything wrong with the way I want things to be doesn't mean that there is something unreasonable about how you want things to be. Instead of tuning you out or digging in my heels, I needed to get involved in trying to figure out ways we could strike a compromise. I guess I just figured that if you sounded like 'it's my way or the highway,' I had to take the highway ... not literally, but you know I just checked out rather than challenging you to compromise with me. Until recently, I didn't realize I was judging you. I just thought my ideas about how things should be were more reasonable and that you were just a controlling person. I'm sorry for seeing you like that. I am going to work at being willing to make compromises, even if I feel you're being unreasonable. What's unreasonable to me isn't necessarily unreasonable to everybody, and I need to remember this."

Tears were streaming down Tracy's face. Joe scooted next to Tracy and kissed her softly. The therapist told them he was very proud of them, because the changes they were able to make were very difficult. It is much easier to judge and be angry than show vulnerability.

Phase 2

Getting each partner to the point of being willing to risk vulnerability and "let the other off the hook" was the goal in Phase I. But this was only the beginning. Over the years, each of them had developed highly predictable, automatic habits of reacting during upsets, and these habits would not likely change overnight. Sooner or later, the goodwill and positive feelings generated in Phase I would give way to the normal frustrations of living with someone who has different priorities and preferences, and the old, emotionally conditioned reactions would begin to return. The degree of success in changing their relationship would depend on rewiring each of their day-to-day emotional habits (Atkinson, 2004, 2005b; Atkinson et al., 2005).

The therapist began the next phase by scheduling individual sessions with Tracy and Joe for the purpose of helping each of them become crystal clear about their habits that were in need of revision. Tracy had the habit of accepting the gut feeling she often had that Joe's priorities or behaviors were out of line. She needed to get into the habit of reminding herself that just because she was upset didn't mean that Joe was doing something wrong. By completing daily worksheets (Atkinson, 2009), she logged and reviewed every time she felt upset with Joe. The first week she literally brought in a fistful of worksheets. The therapist helped her review each one of them, asking the question, "Was he really wrong, or was this one of those situations

where she and Joe had legitimately different priorities?" At first, she argued with the therapist almost every time he suggested that Joe's priorities or actions were legitimate. In general, the therapist responded by saying, "Tracy, you can hang on to the idea that he's wrong any time you want. But if there's a possibility that you're biased, and that you're acting like he's wrong in situations where both of your priorities or expectations are legitimate, then you'll be placing yourself squarely in the company of people who rarely get the kind of caring and cooperation from their partners they'd like to have. This is a mistake you simply do not want to make! It will chase your dreams away from you." Tracy was helped considerably by reading about the findings of researchers who have identified with considerable precision the habits of people who know how to get their partners to treat them well go about doing it (Atkinson, 2006, 2009; Gottman, 1994a, 1994b). She came to realize that she'd get much more cooperation from Joe if she stopped arousing his natural defenses by criticizing him. During her whole married life, she had assumed that she didn't have the right to ask Joe to change unless he was doing something wrong. The idea that she could ask for some changes even if he wasn't wrong was a revelation to her.

The structure of Joe's early Phase II sessions was much the same. The therapist helped him review every upset that occurred between him and Tracy. Like Tracy, Joe soon became expert at retrospectively identifying where he got off track, and he developed the ability to redo situations in his head, making the needed adjustments in his attitude and actions. Within three weeks, Tracy and Joe were each independently reviewing upsets that occurred, with a critical eye toward how they had each reacted during the upsets. Between sessions on several occasions, after they each had privately reviewed his/her reactions during an argument that had gone badly, they were able to bring revised attitudes back into the conversations and interact productively.

During the same time period, the therapist was helping them implement new ways of reacting via conjoint sessions. He alternated between 90-minute conjoint sessions some weeks and individual sessions other weeks. During conjoint sessions, he asked each of them to talk about issues they were having trouble agreeing on. Typically, as they spoke to each other, old habits got triggered, and he intervened in one of two ways. First, each of them granted him blanket permission to step into the flow of conversation and speak for them momentarily. Rather than discussing with them how they could react more effectively, this method involved *showing* them an example of it in real time. He was modeling effective habits (i.e., expressing vulnerable emotions, standing up without judgment, offering assurances). He modeled not just what they might say to one another, but also the kinds of thought processes that could lead to effective reactions. For example, on one occasion when Tracy had reverted to criticizing Joe, the therapist acted as if he were in Joe's head, and said, "OK, she's starting to piss me off ... but whatever ... it's not exactly a crime that she wants me to do things the way she wants ... obviously she feels strongly about this issue ... but so do I. Maybe I just need to say something like, 'Stop it, Tracy! I'm trying to listen and care about how you feel, but it's hard because it feels like you're accusing me of doing something wrong. Sometimes I have different priorities than you, and they're not any more wrong than yours are. I'm willing to talk about it, and I'm certainly willing to try to anticipate and honor your feelings more in the future, especially if I can sense that you're trying to have an open mind and be flexible, too.'"

Joe and Tracy were often amazed to feel how powerfully the course of the conversation could be altered by comments like this. But this method did not always work, and the therapist used session breaks as a second intervention tool in helping them practice new reactions during conjoint sessions. If the therapist perceived either one of them getting stuck in a self-protective state or not responding to him after having spoken for one or the other, he would ask the other to momentarily step into the waiting room. Then he would work one-on-one with the partner who was "stuck." If they were both stuck, he would spend about 20 minutes with each of them. During session breaks, he helped each partner become aware of the thoughts, attitudes, or interpretations that were inhibiting his or her effectiveness, and he would propose and demonstrate how to engage in alternative ways of thinking and acting that would help each be more successful in getting the other to care about his or her feelings.

Conjoint sessions were productive, but Tracy and Joe were frustrated by the fact that they weren't able to do the things the therapist was helping them with on their own between sessions. What was wrong? Each was committed to the task of improving his/her own habits, each had studied his/her habits, could analyze with 20/20 hindsight where s/he'd gone wrong in failed arguments, and with his assistance, each had learned to react more effectively during conjoint sessions. Yet things unraveled each week. Exasperated, at one point, Joe exclaimed, "Is there something wrong with my brain? I know what to do. Why can't I do it?" The therapist smiled and assured him that his frustration was normal. The therapist then proceeded to summarize what neuroscientists have discovered in the past few decades: Learning is state-specific, so that what a person learns while in one state of mind won't necessarily transfer to another. He explained, "This is why even though you've studied your reactions and learned what to do differently, you have trouble doing it when you get upset. During our conjoint sessions, you get upset and I help you react differently, but one successful experience a week isn't enough to rewire habits that have been in place for years. You're going to need more consistent and concentrated ways to practice new reactions when you're upset, and that's what we're going to do next." Joe asked, "Well why did we waste all this time if the stuff we were doing wasn't going to work?" The therapist explained, "In order to practice, first you must know very specifically what it is that you need to be practicing. Your worksheets have given you intellectual knowledge of what you need to do, and the conjoint sessions have given you a feel for how to react effectively in real time. Now you need to take what you've learned and practice these things during 'game conditions'—when you're actually feeling upset."

At the Couples Research Institute, the therapists have developed a variety of methods for facilitating such practice (Atkinson, 2004, 2005b; Atkinson et al., 2005), and the therapist helped Joe and Tracy implement several. Particularly useful was a method that involved asking them each to carry a small digital audio recorder for a period of time. He explained, "Whenever something happens that makes you feel upset or dissatisfied with your partner, just turn on the recorder and express your feelings as if you were talking directly to your partner." Then, the therapist met with each of them separately and played recordings of their partner's complaints through computer speakers. These recordings were usually provocative and had the effect of upsetting the listener, giving him/her the opportunity to practice new reactions while upset. Once the therapist sensed the listener getting upset, he paused the recorder and helped

him/her develop the ability to (1) stay physically relaxed, (2) avoid hitting the panic button and instead utilize soothing self-talk, and (3) say things that were effective.

This method and others that provided Joe and Tracy the opportunity to practice new ways of thinking and reacting when upset were pivotal for the couple. After just two weeks of concerted practice, they reported changes in their initial reactions to each other between sessions. As Joe put it, “For the first time I could sense myself becoming defensive and shutting down. It was like time had slowed down and I could catch myself before I got fully *hijacked* by the negative attitude.”

Phase 3

As Tracy and Joe spent less time in fight/flight mode, the therapist turned his attention from decreasing negative interactions to increasing positive feelings. Studies suggest that partners who demonstrate more interest in each other, engage in more acts of caring and consideration, notice more positive things about each other, and express more appreciations have relationships that are more intimate than do couples who do fewer of these things. However, recent brain studies suggest that intimacy-building behaviors like these are likely to impact relationships differently, depending on the areas of the brain that drive them. The secret to restoring intimacy has to do with figuring out how to “turn on” the brain’s intrinsic motivational states that automatically make us actually *feel* more interested in our partners, invested in our relationships, and desirous of increased levels of attention from our partners (Atkinson, 2010a). In the brain, there’s a big difference between caring actions that are driven by a principled decision to act (e.g., “It’s the right thing to do,” or “It’s how a good partner should act”) and caring actions that emanate from one of the brain’s intrinsic motivational systems. The former will feel like work; the latter will not.

Treatment Process: Late Phase

In the final phase of therapy, the therapist turned the attention to examining the extent to which Tracy and Joe were regularly experiencing feelings emanating from the brain’s intimacy circuits—tenderness, sexual interest, playfulness, and the desire for other satisfying forms of connection with each other. Tracy and Joe weren’t experiencing an abundance of these feelings, but they had much less animosity and more goodwill toward each other. Years of conflict had taught them to invest minimal time and effort into paying attention to each other, and they’d stopped expecting (or even wanting) loving attention from each other. They’d gotten used to living life without love. Some of the therapist’s work involved simply helping them be more intentional about building in time, reminders, and habits that maximized the chances that intimacy-related feelings would emerge. For example, he gave them personalized exercises (from Atkinson, 2006) that prompted them to take time each day to notice and reflect on (1) things the other did that they appreciated, (2) moments when they felt a little extra-positive about their relationship or about their partner, and (3) memories about good times they’d had in the past. He also gave exercises that suggested questions they could ask each other that helped them discover more about the things that made them each feel good or bad in their respective days, and he coached them on

specific ways they could give and receive support in these conversations. Taking the time to do these exercises had a clear effect of generating more tender feelings toward each other, and they began to enjoy and look forward to moments when they received loving attention from each other.

Part of this phase of therapy involved helping Joe and Tracy identify attitudes, beliefs, and habits that were inhibiting or blocking the natural emergence of intimacy-related feelings. For example, although Tracy had an active sexual fantasy life involving regular self-pleasuring, their sex life together was almost nonexistent. Across the years, Joe had given up on getting Tracy interested in sexual activity with him. Tracy admitted to the therapist privately that Joe wasn't exactly the sort of guy she was turned on by—not like the guys in her fantasies. She was not repulsed by Joe, and she said she felt that he was an attractive man. She just did not have intensely sexual feelings toward him. One-on-one, the therapist explored with Tracy the reasons for her sexual reserve with Joe. She realized that she had never really given it much thought. As they talked, she realized that she had assumed that she needed to keep her private sex life a secret from Joe. She decided to question this assumption, and in the next session she began talking to Joe honestly about her lack of sexual excitement with him, and about her sexual feelings and desires. She was shocked by Joe's reaction. Rather than being angry or hurt, he was happy she was opening up. As the weeks passed, she began sharing her fantasies with Joe and found his reaction to be sort of exciting. They began having the best sex they had ever had.

Conclusion

Therapy with Tracy and Joe lasted six months and involved 30 sessions. In follow-up contact with Joe and Tracy six months later, they reported increased flexibility, especially in regard to spending patterns. They were able to talk about their issues without having to prove the other person wrong. They had continued to build positive moments in the relationship and were savoring those moments with each other. Joe and Tracy admitted that there were still some difficulties since terminating therapy. "Sure there are still bumps along the way... ok, some are really big bumps," Tracy laughed, "but we recover fast and go on living our life together." Joe added, "The key word is *together*."

Implications of PET-C for Training and Supervision

The PET-C therapist must be highly skilled in the art of giving direct, critical feedback without clients feeling criticized. Thus, PET-C training focuses on helping trainees become comfortable with saying things clients usually don't want to hear, and on increasing the skill of cultivating receptivity. If you're a PET-C intern in training, chances are that a large percentage of your time in supervision will be spent on deepening your comfort with receptivity-cultivating methods such as

- Indulging yourself in the positive qualities of each client, freely communicating fondness for each partner

- Taking the time to let each client know that you “get” what it’s like to be him/her
- Looking for ways to put yourself on the same level as your clients, so they don’t feel lectured at or talked down to
- Assuring clients that you’re not trying to tell them what to do or what to believe, and that you’re of the opinion that they should do or believe whatever seems right to them
- Operating from a state where your first reaction is to welcome and accept whatever the client says or does
- Inviting clients to share their reservations, welcoming them, and being happy when they come
- Looking for ways to help the client avoid feeling shamed for having relationship habits that predict bad relationship outcomes
- Avoiding getting a “serious tone” as you talk, keeping it relaxed and light, without compromising your directness

A skilled PET-C supervisor intuitively applies the same processes in his relating to the supervisee that the supervisee is learning to apply to his/her relationships with clients. The supervisor is direct while maintaining an attitude of respectfulness and humility in relation to the supervisee. The reader can learn more about PET-C training programs at www.thecouplesclinic.com.

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