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The Family Journal 2007; 15; 420
DOI: 10.1177/1066480707304793

The online version of this article can be found at: http://tfj.sagepub.com/cgi/content/abstract/15/4/420

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Emotional Intelligence in Couples Therapy: An Interview With Brent J. Atkinson

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Brent J. Atkinson, PhD, is a senior graduate faculty member in the Marriage and Family Therapy Program at Northern Illinois University and director of Post-Graduate Training at the Couples Research Institute in Geneva, Illinois. He is the principal architect

of pragmatic-experiential therapy for couples, an approach that translates new scientific findings about the brain into practical methods for improving relationships. Atkinson practices at the Couples Clinic in Geneva, Illinois.

Brent Atkinson talks about the historical development and unique features of Pragmatic/Experiential Therapy for Couples. Methods for improving relationships that draw upon recent advances in neurobiology as well as the science of intimate relationships are described.

Keywords: couples therapy; marriage counseling; pragmatic/ experiential therapy for couples; PET-C; neuroscience; digital audio recording

Nieponski: We're delighted to be speaking with you, especially after reading your exciting and interesting book, *Emotional Intelligence for Couples Therapy*. May we begin with your telling our readers how PET-C (pragmatic experiential therapy for couples) evolved?

Atkinson: That's a good question. Well, there are two personal events that influenced my professional interest. For me, it was my divorce. My first marriage didn't work, and this was about the same time that John Gottman was starting to come out with his research on marriage. So I started looking at that and scratching my head and trying to put the pieces together. I think his findings identify some things that so many of us are blind to. Not everything is common sense about these research findings, and the one that is the most significant is this idea of contempt. We tend to think of the worst things that people do in relationships as cheating and lying and being self-centered and such.

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I think that his findings suggest that, actually, the attitude that we often have toward these people could be more toxic than the things that people actually say and do. His findings clearly suggest that this attitude, contempt—where one person sort of puts him or herself on a higher plane than the other person—stands head and shoulders above the other toxic things that happen in intimate relationships.

Nieponski: You're referring to the emotional reactions? Atkinson: Yes. Well, everything is emotional, as it turns out. But it is a specific kind of emotional reaction that is not just emotions. There is a whole mind-set that goes along with it and that mind-set is—you are more to blame than me—your sins are worse than mine. I find religious parallels, spiritual parallels, in that premise too. For example, if there is one thing that upset Jesus the most, it was people who went around thinking they were better than others just because they avoided committing the most public sins—the most outrageous ones. A person who is selfish, controlling, or demanding often seems to be more responsible for the relationship problems than their more passive partner. But the partner of such a person might fail to stand up for him or herself and instead turns that person into a monster inside their head. The more passive partner's reaction is every bit as harmful to the relationship as the selfish or controlling partner's behavior.

Duba-Onedera: One of the things that I highlighted was your comment, "The bottom line is that if people want their partners to treat them better, they need to think and act like people who usually get treated well by their partners."

Atkinson: Yes, it seems so obvious when you put it that way, doesn't it? Our form of couples therapy, pragmatic/ experiential therapy for couples, is a therapy of radical self-responsibility. You change your relationship by changing yourself. In particular, you change the way you react when you feel offended or mistreated by your partner. Relationship studies suggest that these are the moments that separate the men from the boys or the women from the girls, psychologically speaking, anyway. It's how you respond when your

THE FAMILY JOURNAL: COUNSELING AND THERAPY FOR COUPLES AND FAMILIES, Vol. 15 No. 4, October 2007 420-426 DOI: 10.1177/1066480707304793

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partner does a seemingly outrageous thing that determines the likelihood that you will feel mistreated more or less by your partner in the future. This way of thinking is not the way people usually think. When we feel mistreated, we tend to think that what needs to happen is that the person dishing out the mistreatment ought not to do the mistreating in the first place. The problem is that there are so many yardsticks for measuring what "mistreatment" is. What really constitutes mistreatment? One of the most interesting findings of relationship researchers is that the vast majority of the time when partners get upset with each other, nobody has done anything that is intrinsically harmful to the relationship. There are a whole variety of ways that people proceed in relationships, but we tend to assume that our expectations are the correct ones, and when our partners don't meet them, our partners are out of line. Most of the time, when people feel that their partners are behaving badly, they really aren't. They're operating according to a different set of expectations about how things should be in relationships. Both partners probably have legitimate perspectives—their priorities just aren't lining up at the moment.

Nieponski: So it is a matter of perception?

Atkinson: Yes, the perception of being mistreated—so much of it is in the eye of the beholder. That said, it's important to add that we all know there are certain things that, by anyone's standard, are wrong. We just lump too much into that category and then start looking at our partners as if they've done something wrong rather than something that "I really just didn't like."

Nieponski: As in a personal affront?

Atkinson: Yes, and I think it's sort of a special mission that I feel we're on now to try to get some of this information out, which is why I am happy to talk to you

Duba-Onedera: One of the things that you mention was that this type of therapy helps partners to develop an ability to shift their brain states. Can you explain that a little bit?

Atkinson: Yes, as I started to say earlier, there were two personal situations that drove some of the inquiry on my part that led to the development of PET-C: As I said, one of them was the failure of my first marriage, and the second one was that my son started having seizures when he was 14. We took him from neurologist to neurologist before I realized that I would have to manage my son's care on my own and I'd have to try to figure out what is going on. So I started doing vast amounts of reading about the brain, and I'm very happy to say that he has been seizure free for the past 3 years, but there was a period of 6 or 7 years when it was much nip and tuck. They just couldn't stop them. So, that led me into all of this investigation about the brain. Here's a summary of what I learned. We all have conditioned habits of responding when we get upset or someone gets upset at us. Everyone has. Some of these conditioned habits turn out to be pretty functional, and some of them not so much. But what happens is, we have highly specialized preprogrammed response circuits in our brains, and they can get triggered, and once they're up and running, we are largely subject to their dictates. We get quarantined off in a corner of our brain and cycle around in the same space, and we may know in other parts of our brain that we need to act differently, but we don't have access to those parts of our brain when we get upset. To break out of these habits, neuroscience findings suggest that we need to engage in new ways of thinking and acting at the moments when we get upset and those old, "knee-jerk" emotional habits are up and running. And we need to pair the new thinking with the old knee-jerk reactions enough times so that when we get upset, we automatically have new thoughts at the same time. What happens at those moments when a person gets upset is that they get quarantined off in a corner of their brain and cannot remember the new ways they need to think and act. They need outside input. That is why so often our clients say to us things like, "I wish I could take you home with me because you could just tap me on the shoulder and remind me of things I need to remember at the moments when I need to remember these things. I know better because you've shown us what to do differently, but I can't remember it at those moments." Comments like these from our clients helped us come upon the idea of using digital audio technology. We started making recordings for our clients to listen to every time they became upset. When clients actually did this, after a while they began saying, "You know, I can't even get upset anymore without hearing your voice in my head," Hearing voices is not necessarily a good thing, but in this situation it is! The neuroscience principle called Hebb's Axiom states that when brain processes occur together enough times, they begin to graft together so that the activation of one process automatically activates the other process. So basically, when a person's brain process—that old one that comes with the emotional takeovers—becomes active if, through listening to the recordings we make for them, clients pair a new way of thinking along with the old knee-jerk reactions enough times, then the client begins to be able to remember to do different things when the actual upsets occur.

Nieponski: So the key to success is repetition.

Atkinson: Yes.

Duba-Onedera: You also mention in the book that with that, there are also changes in physiological responses

Atkinson: Yes, That is based on my knowledge of what happens with any kind of learning of a new habit. There are physical changes that take place in the brain. We have not had the money or the equipment to establish that it happens, in particular, with the kind of interventions that we do with PET-C, but I think that there is all kinds of evidence that physical changes take place in the brain any time a person learns a new habit. So yes, the assumption is that we've succeeded in rewiring the brain.

Duba-Onedera: This is just a thought and I'm sure it's very watered down, but I'm wondering, can you explain specifically the difference between the skill of cognitive reframing and what you do with your clients?

Atkinson: Well, there are two things. First of all, there is a cognitive component to our interventions. There's no question about that. At least a portion of what we do is cognitive. But it is not limited to that. A change in cognitions is not the end in itself. It is only effective to the extent that the person is able to utilize new patterns of thinking in the service of getting internal "state" shifts. We all know that sometimes that doesn't happen—you can say positive self thoughts and they bounce right off of something that is going on in there. You can say that you don't need to be so nervous or you shouldn't be so upset and somewhere inside, something is saying, "Oh yes, I should." So the criteria for the usefulness of a cognitive intervention is, does it succeed in helping a person shift to that internal state that they need to be in? But the target is not the cognition. A change in cognitions is a vehicle toward changing of that more encompassing state. That is one difference. The other one is that—I'll pick one of my favorite interventions to use as an example where we send home these digital recorders with partners for a period of a week. Often in a marriage, there is one spouse who is more apt to be the one who is criticizing or launching a complaint than the other one is, as in "Yea, I'd be happy if she'd just be happy, right? Just lay off," you know, that kind of thing. So the one who is more inclined to be expressing upsets—we have that person take the digital recorder home and then we have them, instead of complaining to their partner, complain into the recorder. Then we take that recorder that may have a good six or seven good robust complaints on it, and we sit with the other partner and we plug the recorder into the computer speakers in our office and we turn it up full blast so what he ends up—let's just say it is a "he" in this case—getting is a full, robust prerecorded attitude coming at him from his wife—the sort that he is very accustomed to. The reason I love this method is because we can slow things way down. We turn on the first complaint and I have him sit there on the couch, look across at the other couch where his wife usually sits and picture an imaginary "her" actually making these complaints. As soon as he hears her voice, the first thing he does is break off eye contact every time with his imaginary wife, and she is not even there! He can't hold eye contact with her. And then he gets that look on his face, which is like, "Here we go again. What is it this time?" He has no idea that he is putting out a clear message to her at those moments—by the break off of eye contact and that subtle little scowl on his face, which completely dismisses her complaint. He thinks he is being a saint because he was just sitting there and didn't argue with her, but he is communicating alright. With this method, we help him, first of all, to realize this complex set of things that happen

inside of him and to learn to stay relaxed—keep his body relaxed while she is speaking to him. It is a little bit like when you go outside and it is 10 below in the winter and we instinctively tend to tense ourselves up. I remember a physiologist telling me once that that is actually counterproductive. Your circulation is actually better when you don't tense up, and you stay warmer when your circulation is better. I tried this once—went outside in the cold and found that—I kind of stayed relaxed. You don't have to tense up, and it is probably no better; at least, it didn't seem any better to tense up. In a sense, that is what we do with these husbands in those situations. They sort of learn how to stay relaxed, and that is not so much a cognitive thing; it is behavioral. I mean, it is sort of a conditioning thing. But then, also, we have him pay attention to the emotions that he experiences and the feelings inside, so it is affective and experiential at the same time, and then we also include this cognitive component. We begin by exploring, "What can you say to yourself at those moments?" or "What can you remind yourself of at those moments that is going to help you avoid the usual reaction that happens inside of you?" Then we experiment a lot of times, you know, guys just need to say to themselves, "It's no big deal. There's no reason to worry—not yet anyway. So you can afford to relax and listen to her" after we discover the kind of thing that he might be able to say to himself that can help him stay relaxed and not dismiss her-we have him practice with a fresh complaint. We can do that over and over again with several different complaints in the context of a single counseling session. And that kind of practice, I can guarantee you, he has never done in his whole life before. So that is one of the reasons that I like the intervention, but the reason I am mentioning it at this point is because it involves cognitive-behavioral and experiential levels of intervention. And this one works! Sometimes even after just one sitting going through this and doing six or seven repetitions, clients have come back the next week and said, "You know what—the next time she was complaining to me, I remembered—it's no big deal!"

Nieponski: You do a lot of role playing, don't you?

Atkinson: Yes, yes.

Nieponski: That is part of the teaching experience for the client in learning the language to be used, right?

Atkinson: Yes, but I don't usually call is role playing. Nieponski: Would "modeling" be more accurate?

Atkinson: Let me describe another method we use. We often get partners into a contentious conversation and then alternate stepping in for one partner or the other and putting our money where our mouth is. I think it is a legitimate request when a client turns to you and says, "How am I supposed to respond to that?" You need to show them because most of us don't know. So we do this thing now where we use pads of Post-It notes that come in different colors. You can get blue ones and pink ones, and we use blue for the man and pink for the woman. When I pick up the little blue note while the couple is arguing, that is my cue that I am asking permission to step in for the man and speak for him to the woman. It kind of reminds me of professional wrestling, you know, where there are tag team wrestlers. So when I pick up the blue note, he allows me (this is prearranged; he has to give me permission or that would be invasive, but, usually he is only too happy to let me come into the ring), and then I actually speak for him in ways that are predictive of a successful outcome.

Duba-Onedera: When you do that, are you playing the wife or are you trying to talk to him about different ways that he can be experiencing what is happening to him?

Atkinson: No, actually, it is complex, but I will speak as if I am he to her. I become him for a moment. There are two levels on which he is impacted by experiencing me do that. One of them is, very concretely, he notices the kinds of things I say and how I actually go about wording them, so it is very practical that way. But he also feels the place that I come from inside, in terms of my attitude as I am being him, talking with his wife, and, of course, that is probably even more important because, depending on the attitude—the "state" that a person is in, where they are coming from—the same words may have a dramatically different effect.

Nieponski: Have you had successes with this approach with people of diverse intellectual levels?

Atkinson: In some ways, I feel that the smarter the clients are, the more difficult it is for them to really do the things that this therapy asks them to because they think they are so smart that they don't need to actually do some of the practices that are needed.

Nieponski: Can you speak to that more specifically?

Atkinson: So much of what I think produces lasting change is practice, but the smarter a client is, the more that they will likely say to me, "No, I get it! I get it! I understand what I am supposed to do." And they think that just because they understand it, therefore, they should be able to do it.

Nieponski: So in getting the cognitive part, the client is only "halfway there."

Atkinson: Yes, but I don't even think it is half. Understanding is the easy part. Actually putting it into action requires something, which is more like these reconditioning knee-jerk habits.

Nieponski: And, it sounds like, significant commitment. Atkinson: And, much commitment. One of my favorite examples is a couple that I worked with where he was a struggling carpenter and she was a factory worker. This guy probably was of a lower IQ than the average client, and so I modified the written exercises we often use—but this guy would carry around his exercises in the glove compartment of his truck, and he really worked at it. I have not found a difference in terms of successful outcomes between different socioeconomic groups.

Duba-Onedera: I just want to back up from the techniques to something that you mentioned in the book called the "executive operating systems" that draw people together. I think you have seven of them listed, but anyway, the four that I remember most vividly are

rage, fear, care, and panic. Can you speak to what those mean and how they affect couple communication or couple relationships?

Atkinson: Well, yes, a person needs to have balanced access to all of those natural brain systems to function well in a relationship or so it seems to me—balanced in the sense that they have to have enough access, but not too much. The "fight/flight" systems can become overactive and then people can be defensive when they *don't* need to be. But they also can be underactive as in when a person remains rational or silent while enduring a critical attack from one's partner when anger would be an appropriate reaction, but they don't have it. So to become angry when needed, I believe, is as important a relationship skill as the ability to calm oneself down when anger is not useful or needed. Anyway, you have to not only have balanced access to both of those self-protective executive operating systems but also to the systems that help us create emotional bonds. Four of the brain's seven executive operating systems fall into this category. One produces feelings of tenderness or empathy, one produces the feeling of need or longing for emotional contact with others, one produces the urge for spontaneous or playful interaction with others, and one produces sexual interest. In neurological studies, when any of these four brain systems is electrically stimulated, participants find themselves automatically motivated to interact with others in ways that produce emotional bonds.

Duba-Onedera: Well, it sounds like the brain's "executive operating systems," for example, rage, fear, seeking, and lust, allow someone to be moved into a particular mood that might help them connect with their partner better.

Atkinson: Yes, especially those four that I just mentioned. I have a special interest in situations where the "emotional need" executive operating system has gone dormant and you find one partner saying things like, "You know, he doesn't need me. I'm not sure he needs anybody. When I call him when he's traveling and I say, do you miss me? He says, 'Well, of course I miss you,' but that's not what I meant. I know he misses me in theory—what I want to know is if he feels like he misses me." There is this physical experience of missing someone or longing that some people have very little frame of reference to, likely because during their early attachment experiences between them and their parents—when they did experience these feelings—their parents were consistently unresponsive. Every child experiences emotional need—loneliness and the like—but if there's nothing coming back in terms of emotional support or comfort, what's the point in continuing?

Nieponski: How difficult is it to develop . . .

Atkinson: Pretty difficult. When a person's emotional range is limited, the therapy is much longer. Some people can experience emotions more fully by just slowing down and paying more attention to how they feel, and once they do, they find they really do feel more—they have more access to these executive operating systems and their limited access was just more a function of life getting so crazy that they got distracted. But for others, slowing down isn't enough. They just don't know how to access their emotions, so we slow the therapy down. There are more one-on-one sessions where the therapist is starting in a very rudimentary way during the therapy hour helping the person pay attention to the beginning signs of feelings like emotional need.

Nieponski: Is it when you notice that these emotions are lacking that you schedule individual sessions?

Atkinson: Yes, we normally schedule individual sessions throughout all couples therapy. We move back and forth between individual and joint sessions, but in the case where someone fits this description that we've been talking about, there is often a streak of individual sessions that may include some months, and it's a very experiential therapy then. During the course of the hour, I may be talking with a husband, for example, first explaining to him the purpose of this therapy versus other therapies, in the sense that, during the course of this hour, I'll help him make contact with something that he feels. A lot of times, people think that what therapy is more about is talking things over, figuring out problems, trying to decide how to proceed in one's life, create meaning, etc., but this experiential therapy is all about bringing a person closer to his or her emotional experience in a very real way. In this kind of therapy, I will have him review things that have happened either recently or things that happened earlier in life, and as we're doing this, I'm doing two things. I am, first of all, providing nurturing responses so that the chance for him to experience some emotional comfort or nurturing is there, but then I'm also helping him recognize his natural dampening mechanisms that come in. I'm helping him follow just a little edge of a hint that he may actually feel things, relax his body because, of course, part of what keeps us from experiencing feeling deeply is tensing ourselves—learning to relax and then noticing that there is an edge—there is a voluntary edge sometimes that you can either follow and it's going to take you closer to your feeling or you can distract yourself. The therapy is very focused in terms of what happens inside of a person—to check the experience of those feelings and then gradually he or she begins to trust and become willing to allow himself to experience more of it—first, usually, in relation to me, and then we bring the wife back in or the other way around if the genders are reversed, and often they are, we bring the husband back in and begin to help him have the same experiences of making contact in her presence.

Duba-Onedera: Can you talk a little bit more about what you mean by a "dampening" response?

Atkinson: Well, a dampening response—it's those mechanisms—you can identify the cognitive end of it fairly easily because when something disappointing happens to a person, for example, a person will literally have a habit of saying to themselves, perhaps not realizing that they're saying it to themselves, "Oh well, this is no big deal." That's a dampening mechanism that is intended to take someone away from his or her emotions.

Duba-Onedera: It's almost like part of this is reteaching instinctual responses.

Atkinson: Yes, very much. You know, if we all stayed with what is truly instinctual, I think we'd be in much better shape, but the problem is, due to our growing up experiences, usually, our instincts get conditioned in different ways so that, for example, we shut down, whereas a newborn infant isn't shut down or even a toddler, usually. They're experiencing and expressing all of their emotions. You can see why sometimes teaching communication skills isn't going to get it; at a more visceral or basic level, something just isn't happening or is happening too much and that's what we need to be addressing.

Duba-Onedera: You mentioned "hijacking." Some of our instinctual responses can get us deeper into a situation; however, we've got this "hijacking" of some of our experiences or what we've been taught as children that take over our ability to, as you mentioned, respond as babies would.

Atkinson: Our minds work differently than our experience leads us to believe. What I mean is, we tend to think in any given situation the way we react is based on a more or less a rational assessment of the merits of the actual situation in front of us. What the brain researchers are telling us is that it's much more accurate to say it may have something to do with the situation in front of us, but the way we react probably has *more* to do with our emotional predispositions. In any given situation, people react very differently, depending on their emotional predispositions. But we're not aware of those mechanisms in our brain, and so we think we're really acting objectively to the situation in front of us when we're not starting with a clean slate. We have these automatic instincts, which influence our interpretations—our knee-jerk interpretations. We just don't know that and so we think we're doing what anybody would do at those moments. Does that make sense?

Duba-Onedera: Yes, yes, it does.

Atkinson: One of the things we do in our couples therapy is just help people realize this a little bit more. I mean, some of the brain studies that show how emotionally based our reactions and decisions are in real-life situations are compelling. At the top of the list is Antonio Damasio's studies, which show that people who can truly keep emotion out of their decision-making processes actually make horrible decisions. Emotions are always involved, and we just don't usually think they are.

Nieponski: Do you agree that the popular belief is that cognitions rule?

Atkinson: In these past 50 years, we've operated on what now seems like the illusion that our brains are more organized by rational mechanisms than emotional mechanisms, but the brain simply isn't structured to work that way.

Nieponski: This is certainly very interesting and new thinking. Causing change in the behavior of individuals based on emotions, as you explain it, makes a lot of sense.

Atkinson: Yes, and more to the point for me, the new understanding of how the mind works has pointed me toward actual things to do differently in my own marriage that have made a difference and now, of course, having worked with thousands of couples, I know that it's not just me.

Duba-Onedera: To follow up on your comment, specifically, how do people grip their emotions? What kind of advice do you have for couples to do that so that they can succeed in a first or second marriage?

Atkinson: Well, the first thing is to identify the sort of emotional habits that they have that prevent them from the actions and attitudes that are necessary to succeed in relationships. So that's the first step. You have to know what it is that is the problem and that's a big step for a lot of people because, usually, they think the problem is that their partners aren't treating them the way they should.

Duba-Onedera: So, for example, one habit might be avoiding a judgmental attitude or giving equal regard?

Atkinson: Exactly. For example, some partners never say things like, "I'm not saying I'm right and you're wrong. I'm just saying maybe we have a difference and we need to work on it." I never hear them offer that kind of assurance. But that's an example of one of the fundamental abilities that have been proven to be needed in relationships.

Nieponski: And that would preclude any defensive behavior . . .

Atkinson: When people come for couples therapy, when I try to talk to each of them about how their reactions, when they get upset, are making it difficult for their partners to care about them, they often say, "I wouldn't be reacting this way if my partner weren't treating me badly," and then I say, "Join the club! Do you think you're special? I mean, if you're going to try to be in a long-term, committed relationship, sooner or later, you're going to feel mistreated. And it's not necessarily because your partner is actually mistreating you, but because she's so different from you. She has different expectations, different values, so, according to your standards, you're going to feel mistreated all the time. Join the club!" That's just part of it. If you're taking yourself off the hook every time you feel mistreated, then you're missing the whole thing. Marriage researchers tell us that how we react at the moments when we feel mistreated are critical and largely determine whether our partners are going to treat us better or worse in the future. Once a person embraces the task of identifying his or her habits that need to change at such moments, then the person is in a place where he or she needs to design some kind of repetitive practices like the ones we were talking about earlier in our discussion. For example, every time they become upset, before they go and give their partner a piece of their mind, they listen to a recording we have made together during a counseling session. The

recording reminds them of things they need to remember, but usually can't remember when they get upset. When a person really follows through with this practice, they change.

Nieponski: Would not the bottom line be learning total empathy?

Atkinson: Yes, although that's only one of the skills, but that is one of the fundamentals, yes.

Duba-Onedera: So they first need to be aware of the habits that they have and then they need to come up with a plan of how they are going to change those habits into something positive. Thus, I would imagine that changing the habit is going to change their cognitions and their emotions as well as their body

Atkinson: Yes, we do it all as a package.

Duba-Onedera: When does that shift inside happen in the course of those two steps?

Atkinson: Well, that's kind of a mystery. I don't know. There's a certain point when a person decides that learning to react effectively when they feel mistreated is more important to them than having their partner treat them differently right now. Of course, the reason they come to this point is they realize that if they can get their own act together, their partner will eventually treat them differently. It's a matter of first things first, but there's a certain place where they realize the logic of this whole business of relationships. The fundamental logic of Stephen Covey's Relationship Principle: "If you want to be understood, first understand." They "get it." We help them "get it" by presenting hard scientific evidence that supports this principle and our unwavering conviction. I tell people all the time, "Work with me to the point where I can see that you have these habits that are necessary for relationship success. Right now, you're not even in the ballpark, and you're upset with the way your partner is treating you. Just get in the game and if you don't see dramatic changes in your partner, then, for the first time, you have my ears." When I see somebody who takes it seriously enough to find what their self-defeating relationship habits are it becomes most important to them to develop new habits, then they shine. These people rule the world. They win friends and influence people, and this not only applies to their intimate relationships. One of the most common comments that people make is, "I'm realizing this is actually helping me at work too because many of these principles are an effective way of handling a situation when you feel misunderstood or mistreated because that doesn't happen just in marriages. It applies all over the place."

Nieponski: Would you talk about the use of medications as a shortcut to achieving new emotional learning?

Atkinson: Yes, medications can help, although I don't know whether they accomplish new emotional learning. For example, a person may have a sort of—for whatever reason, genetics or learning—an overly anxious nervous system and their threshold for kicking into that fight/flight place is lower than for many other people. Medication can sometimes even it up a little, give them a little longer fuse, help them stay a little calmer to be able to more consciously participate in these practices, which then help recondition their activations. So I think in many cases, psychiatric medication can be a useful aide to the process, but only that—an aide that gets a person to a place where they can more likely do this stuff.

Nieponski: We're nearing the end of our time allotment, but I did want to ask you how much training is required to become an effective PET-C therapist, and what is the average length of time it would take.

Atkinson: The most thorough training happens at our treatment center for couples located in Geneva, Illinois. It's called the Couples Clinic. There are 10 of us on staff now. Every person who has come on staff is a licensed professional but usually not trained in this way of working with couples. They have to go through a 6-month training process where they begin to see clients, but they are on probation before we make a decision about whether we'll retain them. What that includes is reviewing videotapes of their counseling sessions with more experienced PET-C therapists for 2 or 3 hr a week and engaging in our 4-hr staff meeting during the week. So, that period spans 6 months. We do have intensive trainings for therapists who do not live in our geographic area to come in and do 5 days where they basically do regular full-time 8-hr days. What I am finding is for those people who go through intensive training, it's an immersion experience that's kind of nice. We usually follow it up with teleconference supervision where everyone dials in and they know each other from the training and they take turns presenting their cases and so on. We followed that up last year for three quarters of the year and that seems to do a pretty good job of getting people on their way.

Nieponski: I also wanted to ask if there are requirements certain therapist abilities—that are necessary for someone who is interested in becoming involved with your program?

Atkinson: Well, practically speaking, you need to be licensed in one of the mental health professions and then we ask that people have some interest in PET-C before they come into the training program so that everyone's on the same wavelength. But I think that PET-C is more demanding of a therapist's own emotional flexibility than in some other models of therapy because, on one hand, you have to be very comfortable issuing the strongest, most direct challenges to people that they've ever experienced in their life, but on the other hand, you need to be a person who they experience tenderness and nurturing from in the next moment. Most of us tend to have a little stronger suit in one way or the other. Maybe you have no trouble confronting someone if you need to, but you might not be that natural at being a nurturing person. So, because PET-C requires a wide variety of emotional responses from a therapist, the therapist has to be good at shifting his or her own internal states. It's all part of the training we do—helping trainees pay closer attention to their own internal experience.

Duba-Onedera: It sounds, overall, that this is a lifechanging event for clients, so, it would have to be the same way for the counselor.

Atkinson: Yes, very much. Typically, often, people who go through training say to me later, "The greatest benefit in learning this stuff has been how it has helped me in my own relationships." I know that it's helped me in my own marriage. You know, therapist's divorce rates are no lower than the general public. As a matter of fact, there is some research that says they're higher. So it's great if we can help our clients with this, but this is stuff that is based on a way of navigating relationships that works. So there's certainly that benefit for the trainees and, as I said, that's been the main benefit for me and I'm perfectly happy to pass it on.

Nieponski: There is one final question. How might your book be used in a graduate classroom?

Atkinson: Many professors around the country use it as a text for couples therapy courses. I've had some professors say that they devote half of the course to helping students apply these principles to their own relationships and encouraging their students to use the exercises and workbook on themselves. The other half of the course is devoted to helping students learn how to help other people change their relationships.

Duba-Onedera: Just to tag on to Mary Kay's comment, one of the reasons that I really enjoyed reading your book is because it exudes a positive hope in the potential of people.

Atkinson: Yes, that is true. I am hopeful because I've seen enough at this point in my life to really believe that if you develop the emotional habits that we now know are highly predictive of relationship success and satisfaction, really, the odds are almost certain that you will experience something different from your partner.

Duba-Onedera: I think what I'm going to do after our interview Mary Kay, I don't know about you, but I'm going to reread Chapter 3, the prerequisites for relationship success where you explain the habits and just review those because those seem to be very important.

Atkinson: Yes, they are. They're the pragmatic cornerstones of this pragmatic, experiential therapy.

Nieponski: We could certainly go on, but our time is up. We want to thank you again for talking with us Dr. Atkinson. This conversation has helped us to better understand PET-C therapy—to assimilate your thoughts and ideas concerning the change process through your unique approach to healing relationships. We're sure our readers will also find this to be true.

Atkinson: It's been my pleasure.

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