

NARRATIVE COUPLE'S THERAPY WITH FEELING RESISTANT MEN

MALCOLM C. GRAY *Capella University*

ABSTRACT. The problem of dealing with men who have difficulty knowing or stating what they feel continues as a problem in many forms of traditional psychotherapy but is especially problematic in the context of relationship therapy. A therapeutic model for dealing with “feeling resistant men” is introduced and discussed in the context of information drawn from 30 case studies of conjoint couple’s therapy over a period of 15 years. The approach is based on encouraging men to recognize and better connect with feelings through the introduction and discussion of selected literary materials in conjunction with their unique experience and personal stories.

BIBLIOTHÉRAPIE DE COUPLE PAR LE RÉCIT AVEC DES HOMMES INHIBÉS ÉMOTIVEMENT

RÉSUMÉ. Le problème que pose le traitement des hommes qui ont de la difficulté à prendre conscience de leurs sentiments ou à les exprimer est toujours présent sous différentes formes dans la psychothérapie traditionnelle, mais il l’est tout particulièrement dans le contexte de la thérapie relationnelle. Un modèle thérapeutique de traitement des « hommes inhibés émotionnellement » est présenté et examiné dans le contexte des données tirées de 30 études de cas de thérapie de couple réalisées sur une période de 15 ans. L’approche préconisée consiste à encourager les hommes à reconnaître leurs sentiments et à mieux les apprivoiser en leur proposant certaines œuvres littéraires et en en discutant avec eux conjointement avec leur propre expérience et leurs récits personnels.

The therapeutic model introduced here is based on concepts drawn from the literary tradition and explores ways of understanding how narratives as in stories can provide meaning to clients in the therapeutic context. The poet T. S. Eliot (1919) introduced the literary concept of the objective correlative to explain how in writing, objects and things serve as vessels for difficult-to-articulate emotions and feelings. Eliot reasoned that the object represents an external reality and thus resides outside of the inner self. In the case of literature, when invoked these objects may release information about the internal conditions of the self both for the reader and the writer. The objective correlative anticipates post-modernism and in a way narra-

tive (story-telling) therapy where stories and images invoked may take the clients(s) to deeper understandings of themselves or their situation.

In the model of narrative therapy introduced here, rather than restricting the focus to the client's own stories, objects, ideas and experiences found in literary works are introduced into the therapeutic context. Conditions of common experience in a written work may also invoke understanding, insight, memories that can be processed by the client, especially when the written work parallels or has congruence with the client's experience. This view strongly parallels the work of Michael White and David Epston (1990) on externalization and reauthoring of lives and relationships where the client's stories and images once introduced, explored, and retold in therapy provide the raw material for emotional change in the client.

One of the most frequent complaints I have heard as a family therapist in private practice over the past twenty five years is that wives cannot get their husbands to share feelings about common marital issues. This complaint carries with it a large folk history referencing as a major issue gender differences between men and women. There is increasing evidence at least in some emotional arenas that men (while not necessarily being the "strong, silent type") are likely to manage issues in areas such as loss and grief differently, more instrumentally perhaps while women more frequently address issues at the more visceral, emotional level, (McGreal, Evans, Burrows, & Ao, 1997; Puddifoot & Johnson, 1999; Stroebe, M., Stroebe W. & Schute, 2001). While this view has spurred continued debate, the concern for couple's therapy is how to manage a conjoint situation with a male client who is not easy with the language of feelings/emotions and a partner who clearly wants more feeling as part of couple's communication.

This paper is drawn from a review of 30 case studies accumulated over a fifteen year period in which the male member of a couple presenting for therapy struggles with the expression of feelings and self-expression. In the majority of cases reviewed the male subject has grown up with an alcoholic or other parent from an addictive pattern family. Here, an addictive pattern family is one in which some degree of addiction either at the parental or multi-generational level exists. In most reviewed cases, more often the fathers of the male subjects were involved in an addictive pattern.

In describing common characteristics reported by the men in this study, the central issue in the life of the parent addict and often for the men themselves is the inability to effectively address self as an existential reality and the lack of or avoidance of feelings especially with regard to self-perception. In support of the view that the inability to face how one feels about oneself (a recurrent theme in the case of the men in this study) is largely a familial learned pattern, one client, in reflecting on his father's behavior, commented that, "It was as if any feelings that came up in the family were quickly

squashed even if they weren't about him. They (expressions of feelings) seemed to make my father angry." In these families, the sense is that no one is allowed to have feelings as though they would cause "feelings" to occur in the addictive parent. As another male subject noted, "Even in returning home as an adult better able to talk and with some increased awareness of self, when the family would sit down at the kitchen table to talk together and catch up, Dad would roll the TV (his constant companion) in from the other room, place it centrally in front of the gathered group and turn it on loudly." In the presence of the parent, the rule becomes don't feel, don't think, don't talk, it isn't safe or acceptable. It is generally argued that this introduces distortion in a child exposed to this pattern where the sense of self is diminished and a learned avoidance of the recognition and expression of feelings develops. Without access to feelings in the family training center, individuals develop uniquely incommunicable and predictable behaviors around self awareness and self-expression. Woititz's (1983, 1990) seminal article both introduced and described this particular family pattern as it applies to alcoholism.

However, in the United States, a highly consumer-focused, service-based socio-economic system, there are multiple cultural addictions available to individuals who have difficulty in addressing self and attendant feelings about self. Food, work, sex, focus on others, spending, gambling, television, the internet are all recognized non-chemical addictive behaviors in the society. These distractions offer many people delivery from conscious emotional commerce with self. The extent of the problem is easily illustrated. For the sake of simplicity, if we use alcoholism as one form of addictive family pattern behavior, it is easy to recognize the pervasiveness of the problem. In 1992, it was estimated that 7.4% of American adults, 14 million people were found to have alcohol use disorder, dependence or abuse (Grant et al., 1992). More pessimistic estimates range as high as 30 million Americans having alcohol related issues. The extent of this pattern is further illustrated by recent national data on children and alcohol abuse suggesting that one out of every four children in the U.S., approximately 25 % are growing up in an alcoholic abusive or dependent family (Grant, 2000). In 85% of the 30 cases reviewed here, male partners were able to identify one or both parents as having an addictive pattern of one sort or another – many alcohol related. Other data suggests a 50% probability of developing an addiction if having grown up in an addictive pattern family (alcoholic), Woititz, 1990. Coming from one of these families also substantially increases one's chances of marrying someone with or who develops an addiction.

The narrative perspective as originally envisioned in the Epston and White model (1990) raises as its central issue the question of the limiting perspective of culturally internalized, subjective insight. They argue that most culturally normed and thus internalized stories in post-enlightenment western culture,

and I would say especially for men, fall into the logical and linear positivism characteristic of traditional western society. The tradition emphasizes classification, characterization, and assessment of socio-cultural and natural phenomena as if they represent measurable linear constructs.

This provides for a perspective on self and others described by assessment, judgment and hierarchialization of life situations. What is lost is the experiencing of the quality of a phenomenon, a person, or their uniqueness. In western culture, White and Epston (1990) call these ways of viewing oneself dominant-problem saturated stories, i.e. understanding based on the premise of what is wrong. The problem focus becomes a story pattern of people's lives that become fixed and are lived out according to these more normative linear storylines.

As a counter to this position, post-modern theorists like White and Epston (1990), Anderson and Goolishian, (1988) and Beckvar and Beckvar (1998) hold that a story as a narrative, creative process has a much greater generativity and problem solving capacity than normative cultural models can offer. Beckvar and Beckvar (1998, p. 44) suggest that,

Our theories or stories are understood as the stuff of human experience, encompassing our sciences, histories, politics, economics, and religions-our personal as well as our professional lives. Thus, every conversation, every theory may be seen as an exercise in story telling. And we may become aware that the stories we tell ourselves guide our lives and our work and ultimately create our reality. Indeed our stories may live our lives for us. To speak of stories rather than "reality" means that "truth" in the tradition of logical positivism is not available to us. According to the notion of storied reality, the form of relationships with self, others, creatures, and things necessarily takes the form of the way we story ourselves and others.

Using story as the central theme in countering this process, then, White and Epston (1990) conclude that, "The identification of unique outcomes can be facilitated by the externalization of the dominant problem-saturated description or story of a person's life and relationships", p. 16. Narrative therapy in this application then suggests a method of re-authoring or creating alternative stories by a method whereby the individual is encouraged to examine their personal ". . . stories, taking them over, and making them their own" (1990, p. 13).

Because of the struggle to reach a common ground for "emotionally" polarized couples containing feeling resistant men, a therapy of alternating conjoint couple's sessions with husband and wife both being present with the option of having the husband and wife come for individual session emerged over the past fifteen years. In these cases it is essential to invite both participants to engage in individual sessions as needed but also to make the therapy specifically contingent on the man (who is feeling resistant) coming to both

individual and conjoint sessions as needed. This process, pattern and treatment approach is explained early in the couple's conjoint work.

The presenting problem most frequently put forward by both members of the coupleship is *communication problems* or *the inability to talk to one another*. In a surprising number of cases, the males often agree with this observation though the women described by these cases more frequently call for the appointment. The exception is when the male calls for help because his wife insists or will leave him, when she has left him and often when she is having an affair which is often tantamount to leaving him or at least getting his attention. These couples readily identify an apparent gender imbalance in the ability to address feelings on the part of the male (other than anger). Couples whose primary presenting problem is current substance abuse are referred to substance abuse treatment as a first step.

In the case of this particular population of males, in addition to the Foucaultian argument [as cited in White and Epston (1990)] of the internal tyranny of the normative cultural story as told by external "so-called" experts, there is often a specific lack of awareness of the existence of the emotional as opposed to the logical. Based on my small sample, men who have already been strongly socialized to avoid feelings and emotions as part of the male cultural "normative" model present a world and self-view that is also strongly aligned to Descartes "linear" view of the world, *cogito ergo sum* that proposes thought and rationality over emotion. With the men drawn from these case studies, the reference to feelings often becomes something more akin to an active disdain or a blank stare. It is not uncommon to hear, "What does she mean by I don't have any feelings" or "I don't know what she wants." In conjoint session many of these men present as defensive, distrustful and anxious. Commonly presented "male" responses to conjoint discussions in session emerge as stone-walling, anger, withdrawal, shutting down and threats to leave. Threatened or real violence is not uncommon in these polarized relationships. Women frequently describe their feelings in these relationships as empty, confused, and themselves as angry, lonely and abandoned. This makes the doing of relationship very difficult. However when faced with the imminent collapse of their relationship world, it is often this potential loss that opens the door for the men to search for some of the answers.

The argument about therapy within therapy for feeling resistant men is not meant to imply that the women involved in these coupleships do not also have limitations in how they address feelings and communications. Many of the women also come from addictive and addictive-like family patterns. Individual sessions for the female partner are often also provided as needed to keep the therapy moving. Treating men in the context of the couple's therapy is akin to creating a story within a story. The plot can be very complicated. As the therapy progresses, men may become better able to share feelings

conjointly and this is often taken as a sign of progress in the couple's work. It is not infrequent for a feeling of support and encouragement to emerge as though the female partners "are pulling" for their mates to succeed at the task. This is often expressed as a value for the good of the individual as well as the coupleship and is reinforced with the stated objective that being better able to discuss feelings between both partners will provide the raw material to assist couples in resolving their differences.

The primary outcome of the majority of therapy based outcome research has been to indicate that what works effectively in therapy is the relationship between therapist and client. Consequently, that therapy should take on a conversational tone that is most importantly personal and respectful is not much of a surprise. Here, the collaborative, language system approach especially as contained in the work of Goolishian and Anderson (1987) is useful because the focus turns toward the narrative and the therapeutic intent is seen as a collaborative conversation. This allows for an approach that is non-threatening, and is delivered by a male therapist, within the cultural-gender framework of "male" conversation. The collaborative language systems approach is often described as less hierarchical in nature, and mutually respectful. Using the framework of "male" conversation raises its own ethical and political issues, but in these 30 cases, the majority of female partners seemed to feel that if it helped the male and therefore supported the relationship it was a successful strategy. As one woman reported, "It makes sense, I can't talk to him, and maybe you can?" Defining this approach in the context of couple's therapy seems to help both partners accept that one or the other may require some individual help and coaching. Maintaining therapeutic neutrality in this context becomes a challenge. However presenting this in terms of a coaching perspective rather than exclusively as therapy seems to help maintain balance. That this approach may represent a problem for many women therapists is not only acknowledged but seems a trend in private practice in my experience. Thus in Tucson where I practice, for example, I see an increasingly frequent situation of having men in relationship therapy "out-sourced" to male therapists who can work in parallel with the relationship therapist. Many of these cases are drawn from that category.

In addition to the languaging systems approach, thinking in terms of a constructivist, postmodern, systemic perspective is helpful here. The therapeutic relationship is defined in terms of the participant observer rather than residing in the exclusive domain of the healer as one who knows what is best. Rather the therapist becomes the co-facilitator in this case. Here the therapist actively works toward restorying as a way of countering the normative, "You are the expert." As Beckvar and Beckvar (1999) suggest, "...in the process of perceiving and describing an experience, whether to ourselves or others, we construct our reality as well as our personal knowledge base

about reality.” Accordingly, we can only know constructions of the world that belong to us. Constructions of perceived reality are expressed through a system of language or in Maturana and Verela’s (1980) original use of the term “*linguaging*.” Here the telling of stories, *storying* and *restorying* becomes a co-creative activity. In the therapeutic environment, understanding the context of language, its creation and consequences then becomes grist for the therapeutic milieu. Part of that *restorying* is to challenge the dominant normative problem-saturated narrative established in the first family environment or genre. I often tell the client that their relationship behavior that doesn’t work for them (in their case referring to behaviors characteristic of them) has been learned, thus it can be unlearned and re-learned. This deconstructionist intervention often sets the stage for stepping outside one’s self and obtaining at least a glimpse of White and Epston’s (1990) externalization. For it implies that there is nothing wrong with the person and implies that if one wishes to change, a person can learn to be different or in narrative terms retell the “*story*.”

Ideally having gone through the process of *restorying* the male client experience around self and self expression both individually and conjointly, the next step is the shift to both partners sharing and retelling the relationship story. Here couples are often supportive in helping one another, and consequently the couples *restory* and understand the individual and joint experience. Once the polarization has decreased the emotional distance between the couple, some modicum of support and trust can be re-established or created. However, I have often got this far and asked the husband, “*how do you feel*” only to receive a blank stare, as though the question was not heard. It is apparent that while individual, couple and family *restorying* can improve the marital harmony to some extent, often the men have only a few additional feeling skills to move forward. When such men struggle and are at a loss for words, much less their feelings, the therapist is faced with a number of options, e.g. giving up on the therapy or referring the client to some other treatment modality with the hope of their being able to develop an expression of their feelings. While the first option ends the therapy, the second has the drawback of putting the couple’s therapy on hold. I have come to this place with many men in couple’s and individual therapy. Among ideas to alleviate this bottleneck of expression is for the therapists to attempt to train, re-train the client to recognize and express feelings. However, here the problem is the lack of context to learn or experience the process. We have already seen that developing feelings exclusively in the context of the couple’s work runs the risk of compromising the male, and may add to the belief that the male client is incapable of feelings. The risk is unwittingly encouraging the female client to “*give-up*” or having the couple accept things as they are.

It is here that the therapy then requires an additional element to create a medium to retell the story “with feeling.” Faced with this still “not yet awake” dilemma on the part of the male partner, it appears that the milieu of their own personal and couple experience may not offer enough of a source for connecting with feeling, and while progress in sharing some feeling in the relationship has been made, it is far from a habitual pattern and a bit shaky as an acquired skill. Strategically, it also seems highly risky to rely on the relationship communication to continue reinforcing the opened door to feeling. So, it is to other story – re-storying sources, such as the derived biblio-approach where therapist and client co-create an emotional framework of story through conversations around introduced literary works, that the therapy moves. This approach of reading stories of others’ experience, dilemmas, and feelings introduces the client reader to an objective—subjective dialogue with the therapist about the nature and essence of emotion and feeling without consciously pressuring the client to “have his feelings.”

Story telling, myth, poetry, and literature reside in a domain that corresponds more to the creative and unique self. Sometimes these literary works offer situations and examples of feelings and emotions that have a more universal sense about them. Self help books and materials are discouraged because of their propensity to offer insider “expert” explanations that carry right or right sounding answers. These often appeal to the logical positivist trap of knowing. In using story telling, myth, poetry, and literature, rather than as one male client put it “psycho-babble,” the conversation can involve discussions and assignments to respond to situations that carry potential emotional meaning in relationship to the characters, to the client and or to the client in relationship to the characters. The client is supplied with a list of books and materials that I rely on most heavily in the process. I refer to them as “Books of Spirit” because they have become meaningful books for me in their own right and offer personal reference to the co-conversations with clients who also may read the books or segments of them as part of our co-creative discussions. I tend to pick materials for reading and discussion based on an educated guess and some insight (having worked with both the men and couples for some time) as to what may invoke images that provide the fuel for experiential connectivity and identifying and talking about feelings. As an example, Rodolfo Anaya’s *Bless me Ultima* (1994) is a novel and story used with an Hispanic male client who is caught with a confusing identity between being a particularly sensitive male in a close extended family where the members both male and female have adopted a very linear non-feeling manner of dealing with life, e.g., being focused on getting ahead and in this particular case away from their border beginnings. The client wants to be part of the family, strong like them, but when he tries to be like them feels he falls short, becomes depressed, can’t face his feelings and binges on drugs and alcohol. In *Bless me Ultima*, the hero, Antonio is caught as a small boy

between his strong male Father's family of the Llano and his Mother's more settled farming community life along the river. This struggle of identity is embedded in Antonio's emergent coming of age story and has become a modern classic. Here the similarities, disparities and subtleties of the story and the hero's life serve as potential for the emergence of the client's feelings. Antonio's experience in the story provides a framework for the client's articulating his own emotional experience. If he can learn to construct an emotional reality through Antonio's story, he can begin to develop the skills for understanding his own emotional life. The rest turns into a therapy of feelings and expressions either directly or indirectly related to Antonio's character in *Bless Me Ultima*.

Shared story telling as a form of therapy introduces the client to a context for the client to learn what feelings are and how they function by example. It also offers the vicarious experience of emotion through narrative literature, and in the narrative therapy tradition, invites the client to tell and retell their own story "with feeling." Other contemporary examples I have used from literature include, Peter Matthiesen's (1978) *Snow Leopard*, Leslie Marmon Silko's (1977) *Ceremony*, and N. Scott Momaday's (1977) *House Made of Dawn*. All have powerful stories about men in various contexts. Clients are often able to empathize and identify with the book's characters. This provides the raw material for discussion, identification and processing of both the character's feelings and (with coaching from the therapist) the client's feelings about the character's story, all fodder for feelings based treatment. These discussions often lead back to situations and circumstances identified in the couple's therapy or the client's life thereby providing reinforcement and a direct link to understanding feelings in the larger social context.

This approach is not a quick or easy therapy. Creating an alternating conjoint therapy with separate individual sessions over specific issues is complicated, requiring considerable balance and rebalancing from the therapist. Work with men in couple's therapy with the admitted purpose of assisting men to better express their feelings as an ongoing process of the therapy has numerous pitfalls and inherent difficulties. It is a strength that such changes are attempted in the context of the relationship, even if that relationship is difficult. The context provides both the impetus and the support for men to change. What is unique is using literary sources in the manner of Eliot's (1919) idea of the objective correlative to assist men in connecting with feelings. It is in effect a bibliographic therapy within the context of marital therapy and can be successfully undertaken with therapists who have adequate experience with couples and "feeling resistant men."

Narrative Couple's Therapy with Feeling Resistant Men

APPENDIX

BOOKS OF SPIRIT

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MALCOLM GRAY is a college and university professor, family therapist, program evaluator, educational and organizational trainer. He has worked extensively in professional degree programs through Union Graduate Institute, the Fund for the Improvement of Post Secondary Education, the Minnesota Center for Social Research, and other institutions. His primary credential is the experience accumulated over 25 years working in the field of family psychology and psychotherapy. Dr. Gray is an American Association of Marriage and Family Therapy (AAMFT) Approved Supervisor. His interests include cross-cultural research, archetypal psychology, the ethnography of the family and qualitative evaluation research.

MALCOLM GRAY est professeur d'université, thérapeute familial, évaluateur de programmes et formateur pédagogique et organisationnel. Il a beaucoup travaillé dans le cadre de programmes de formation professionnelle à Union Graduate Institute, au Fund for the Improvement of Post Secondary Education, au Minnesota Center for Social Research ainsi que dans d'autres établissements. Il a acquis ses principaux titres de compétences à travailler pendant plus de 25 ans dans le domaine de la psychologie et de la psychothérapie familiales. M. Gray a effectué des travaux postdoctoraux en thérapie familiale clinique; il est superviseur agréé de l'American Association of Marriage and Family Therapy (AAMFT). Ses intérêts portent sur la recherche interculturelle, la psychologie archétypale, l'ethnographie de la famille et l'étude d'évaluation qualitative.