

'I try so hard, my dear, to show that you're my every dream.

But you believe each thing I do is just some evil scheme. A memory from your lonesome past keeps us so far apart... Why can't I free your doubtful mind and melt your cold cold heart.'

Hank Williams.

Legendary country singer Hank Williams tells it like it is. He is describing an experience that would be familiar to many of us, whatever our sexual orientation, where your partner has moved from potential `dream′ to behaving inexplicably towards you with a 'cold cold heart'. This seemingly destructive movement, created by both parties, is what I call a 'relational trauma state' or RTS (Slattery 2006) and it can take many different forms. What I have discovered, through my own relationships and working with couples, is that an RTS is, if therapist and couple can tolerate its more heinous qualities, pure therapeutic gold! It is the highly individualised 'apprehending-of', and 'being-with' this state, rather

than coming to a more intellectual 'understanding' of it, that is the therapy.

My belief is that we are relational beings and that reality, identity and experience are cocreated phenomena. There are many theorists who support this notion in different ways; Fairbairn's 'object seeking infant'; Rogers' actualising tendency' and `conditions of worth'; Winnicott's recognition that the basic 'unit' is 'a nursing couple'; Buber's 'I-thou relating' and Kohut's revisioning of narcissism as a problem that needs a relational other to 'treat' it'. Coming more up to date are two schools of thought and practice that I find particularly helpful: Intersubjective Systems

Theory with its post-modern insistence that all experience is subjective and contextual, and Dialogical Gestalt that works with the primacy of 'confirmation' and 'contact':

'All human beings have the deep existential need to be confirmed by others. It is a need that is there throughout life, but is particularly paramount when there has been faulty attunement between the child and parents.'

(Hycner and Jacobs 1995)

So as we are 'creating ourselves with others', in an ongoing way, through relationships then couples therapy is a great mode of therapy containing, as it does, our best chance for understanding and healing with another who is deeply involved with us. C. S Lewis puts it rather well:

'As soon as we are fully conscious we discover loneliness. We need others physically, emotionally, intellectually: we need them if we are to know anything, even ourselves.'(Lewis 1960)

Surprisingly, in this list of basic needs, he misses out 'spiritually'. This too is a core human need.

In this article I will describe how I see the 'RTS' developing, what I think its purpose is and what theory and method I have found helpful in working as a therapist with couples who arrive in therapy in such a state.

What is a 'relational trauma state'?

An RTS is a systemic relational phenomenon that is co-created by the couple out of their



David Slattery

previous experience and current expectations and assumptions. It is unique. In order to really understand a relationship an attitude of openness to, and respect for the diversity and difference of each couple is essential.

For people who have problems with difference, and given the amount of war and strife and 'hate crime' that exists in the world it would suggest that that is the majority of us, a straightforward expression of difference has not been possible and so some other way of being has been developed. An accumulation of such experience of miss-attunement will lead to a persistent state of trauma. An appreciation of the 'politics of difference' is important here. Part of what is often helpful is for the couple to really hear each other in their difference and simply try and accept that.

Often couples arrive in therapy in a last ditch attempt to save their relationships having endured years of frustration,

dissatisfaction and loneliness. For the couple the situation they are in often feels hopeless and deeply entrenched and the behaviour of the other deeply offensive and 'wrong' (in a reified sense). This relational trauma state can put enormous pressure on the therapist to find 'the answer'; to provide some 'hope' where none seems to exist, except perhaps unconsciously.

Part of the reason we form committed sexual relationships is in an unconscious attempt to resolve previous relationship traumas. Now this is not a new idea, back in the 1960's Henry Dicks was describing just such a process. He found that in marriage unconscious 'collusions' were formed and that it was the Sherlock Holmes-like unravelling of these knotty psychoanalytic puzzles that was the work of 'marital therapy' (Dicks 1967).

In contrast to this method I have learnt that the more I can be in state of `not knowing', а approaching the couple from a place of being genuinely open to finding out (rather than already knowing), the more liberated people feel from what has being constraining them. This is in no small part due to the `acceptance' that this method `therapist prizes above expertise'. Many traumas are after all caused by 'adult expertise' (ie. misattunement) over children! Further it is the experiencing of this process that is healing not the expert 'diagnosis' of the therapist or the merely intellectual understanding therapist and couple may come to.

So to accurately perceive a relationship we need to develop an approach that is contextresponsive. A way of working and thinking that is alive and creative, in which we are prepared to discover, not our predetermined theories, but actually what is. There is a way in which this is very simple, though far from easy. My colleague Jill Gabriel, who integrates the work of body therapist Stanley Keleman into her work, captures this simplicity beautifully:

'Two people, each with their own shape, come together to form a third shape, their 'relationshape'. This shape holds the potential for individual growth, intimacy, connection and transformation.'

In his novel 'All the Names' Jose Saramago names something similar:

'....if one of the two commits adultery, the person who is most hurt, who receives the deepest cut, however incredible it may seem, is not the other person, but the other 'other' which is the couple....'

Such is the pressure in these states that it can be hard to move, to think, to imagine. It is a hugely important part of surviving these states that we find ways to keep moving, breathing, to stay alive to the possibility of other states. Robert Bly, the poet, mythologist and 'masculinist' has some particular thoughts on relationships:

'People have the wrong idea when they think that they will get married and live happily ever after. Marriage is like an alchemical container: once you seal it with your intention it gets hotter and hotter.' (Bly 1988)

Here he is referring to the potential of transformation through alchemical heat, but if there are hidden leaks in the relationship vessel it can get colder and colder, or become strangely lifeless and unsatisfying. These are all clues to the existence of an RTS, as is the inability to maintain any sense of goodness or indeed any other affect state other than the one of trauma.

I have sometimes made the mistake of assuming that a couple can remember other creative affect states (as they are very clear and memorable in my mind) when in fact their experience at that moment is that nothing exists apart from the state they are in. I think this is different from simply 'being in the moment', where however difficult a feeling state might be, a connection to other more pleasurable self-states would remain.

So when couples are in an RTS my experience is that they cannot relate to any other aspect of their relationship. Once they are in it (and the descent can be very steep and sudden) they are locked into something antirelational and non-creative yet sort-of perfectly formed (in the sense of a tightly locked dynamic that can seem impossible to be with or unlock or understand).

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The building of a relational trauma state

It is out of this powerful interminaling of hope and fear that an RTS is made. This tightly interwoven, mutually serving, intersubjectively created and, in its pain and perversity, utterly reliable relationship state has often been grooved and crafted over years. Such states have a strong narrative and are easily experienced, both by the couple and the therapist as a reified relationship style constructed as they are from experiences of trauma. In other words when you are in one or faced by one it is easy to feel hopeless and the only thing to do is get rid of it, and if that means getting rid of your partner (or in extremis yourself) then so be it. We can start to see how hugely difficult these states can be to work with.

According to intersubjectivists Stolorow and Atwood,

'It cannot be overemphasised injurious childhood that experiences-losses...need not be traumatic (or at least not lastingly so) or pathogenic, provided that they occur within a responsive milieu... Pain is not pathology. It is the absence of adequate attunement and responsiveness to the child's painful emotional reactions that renders them unendurable and thus a source of traumatic states...

(1992:54).

So what is traumatic is not the event, but the lack of an attuned response to the event.

'Therapeutic impasse' is an aspect of intersubjective systems theory that is helpful with

working with these trauma states because it considers that stuckness in the therapy is rooted in the interaction of subjectivities between patient and therapist. This helps to take the pressure off the couple and undermines the idea that 'someone is to blame', and so is very affirming of the idea of difficult states being created relationally.

'Contact' is hugely important in dialogical psychotherapy and is in fact Gestalt's most important therapeutic milieu. I am mentioning it here, as it is hugely important in working with RTS. Intersubjectivity has given me some sound ways of approaching and understanding difficult states with couples, and to work in contact and dialogue gives me a practical method.

Will and Anne had a violent relationship, which would seemingly erupt out of nowhere. I felt fairly frozen and controlled in their presence and we all felt very stuck. It was only when I dropped my fear-driven attempt at fairness, (listening to them for equal amounts of time) in favour of really trying to make contact with Anne who was often withdrawn, that the RTS began to unravel. Will felt very moved hearing about Anne's distress at their lack of intimacy and in turn Anne felt some warmth in the intimacy of being listened to.

Here we can see impasse theory and contact in combination. The start of the dissolving of the RTS was in me paying attention to my subjectivity, my fear. This enabled me to then make contact and this released the impasse that had lasted for some months between us. Here we can see how these postmodern theoretical forms allow a relational trauma state to be more fluid, complex and individual compared to the idea of an 'unconscious fit', which by definition is a theorising that is pre-known, based as it is on pathologising contact between a couple.

'A memory from your lonesome past keeps us so far apart...'

How past relational experience haunts present relationships.

Hans Loewald has a beautiful phrase when describing the purpose of psychoanalysis, 'to turn ghosts into ancestors.' (Mitchell 2000: part one). Note that he is not talking about getting rid of ghosts, or denying their existence, rather about the purpose of therapy being to address the crucial task of laying to rest previous destructive experiences of relationship both lived and imbibed through family mythology. I have added 'relationship' to his phrase, although there is a sense in which this is unnecessary. If you believe, as Winnicott did, that there is no such thing as a baby, only a nursing couple, then all ghosts are relational.

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Therapeutic technique and the power of doing nothing!

So what can be done? I have outlined above some of the thoughts and theory I have found helpful in navigating these distressing states but I also want to say something about our position or posture as therapists.

I would make a plea to therapists of all persuasions to consider the power of 'doing nothing'. By this I mean attempting to apprehend accurately the detail of a trauma state, rather than being too busy. To prize the techniques of 'attunement' and 'acceptance' over 'insight', 'interpretation' or 'formulation'. As with dreams and panic attacks all that is needed is already there, we simply need to find a way of 'hanging out with the process'. An attuned-to RTS will unravel and heal itself and its occupants!

I say 'simply'! I imagine a few couples therapists reading this and heaving a weary sigh or sneering at my naiveté. Maybe I haven't come across the sorts of trauma you have come across. It is important in this instance to not confuse 'simplicity' with 'ease'. I am very aware of the massive pressures a couples therapist can feel, and has to try and endure. In fact this is exactly point. I have often the undermined the exploration of a trauma state with a couple by fear-driven premature, interventions. So this 'doing nothing' is no easy path, rather it is to dedicate oneself as a therapist to carving out space where none exists - to try and withstand the psyche-crushing pressures of these states 'from the deep' to give a chance for reflection and compassion where none seemed possible.

We could think of the consulting room as a sort of 'resonating chamber' where such heat can be borne. This poem says something about the pressures and possibilities inside such a vessel.

The Poem

Coming nearer and nearer the resonating chamber the poem begins to throw itself around fiercely, silent stretches of snow, grass waving for hundreds of miles.

Intent pierces into hard wood, which grows dense from inside, something mad penetrates the wood, something alive, something human, like a violin that reverberates with thought.

A fierce intent that nature does not know of drives inside the poem, changes it, thickens it with sober weight; it is something dense, a human madness.

(Bly 1987)

It is just such a chamber that is needed to bear relational trauma states and clear boundaries are an important part of creating this chamber.

My experience shows me that many couples benefit from being together in a non-active, nonreactive environment (quite often there is already enough reactivity to power a small town!). For a therapist to 'be' in this way, rather than intervene with interpretations or ideas or tasks, is a great achievement and it can be hugely helpful as a basic position. Again from Bly:

'Another Doing Nothing Poem.'

There is a bird that flies through the water. It is like a whale ten miles high! Before it went into the ocean, It was just a bit of dust from under my bed!

(Bly 1987)

This movement from 'bit of dust' to 'whale ten miles high' is what can be revealed if we can apprehend relational trauma states, and through attuned responsiveness allow their painful beauty to unfold. If not, the potential of them remains as unknown, unseen and dry as dust.

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