

INTRODUCTION

A PERSONAL NOTE

When I began counselling in GP surgeries, I met a far wider range of people seeking counselling than in my private practice. The extent of presenting problems was enormous. I like to think that my initial person-centred training, together with good supervision, generally enabled me to assist these people reasonably competently, though I was by no means free of misjudgements. There was, however, one group which produced reactions in me ranging from unease to severe anxiety: around 20% of referrals were for couples unhappy in their relationship. My training had been entirely about counselling individuals; the only advice we had been offered about working with couples was to use person-centred techniques in joint sessions in much the same way as with individuals.

My attempts to do this were, if not actually disastrous, certainly highly unsatisfactory, both to myself and to the couples I attempted to counsel. I vividly remember a husband and wife having a huge and escalating row, after my naive suggestion that they 'attempt honestly to communicate their feelings', while I sat helplessly listening. Some couples, in contrast, were not openly angry with each other; rather, they brought a contagious sense of hopelessness into the counselling room. I tried ever more desperately to work effectively with couples, but very little I had learned seemed to help.

I needed guidance on what I should *actually do*, but the books I read were too theoretical and too generalized. None gave really practical help by suggesting how ideas about couple counselling might be translated specifically into practice moment by moment.

Fortunately, I found supervisors who were family therapists, who introduced me to a variety of unfamiliar yet relevant approaches. One of these was solution-focused therapy, a down-to-earth way of working which, when applied to couple counselling, encourages people to identify their relationship's strengths and then to define and monitor realistic goals. Using solution-focused practices seemed to improve my work with couples, though at times I missed the more open-ended nature of person-centred therapy.

I then discovered narrative therapy, developed by Michael White and David Epston, pioneering family therapists from Australia and New Zealand. Their values and practices seemed to have much in common with both solution-focused therapy

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and person-centred therapy (Payne 1993). As I saw it then, narrative therapy appeared to combine the person-respecting and exploratory nature of Rogerian therapy with the practical, brief, resource-identifying nature of the solution-focused approach. Studying with Michael White at The Dulwich Centre in Adelaide, together with seminars in the UK with my supervisors, enhanced my understanding and practice of narrative therapy and increased my confidence when counselling both individuals and couples.

I wanted to share my discovery of narrative therapy. In 2000, Sage published my book *Narrative Therapy: An Introduction for Counsellors*, which contained some examples of counselling couples, and at this time I also began to present workshops for counsellors who wished to expand into couple therapy. The second edition of my book (2006) contained a longer section specifically on couple counselling.

I wish I could time-travel back to when I first recognized my limitations in counselling couples, and hand a copy of this present volume to my former self! As that seems unlikely in the present state of theoretical physics, I offer it to present-day readers, trained in individual counselling, who wish to extend their practice to working with couples. I hope that it will enable them to take the first steps towards undertaking this work, which can be more difficult, demanding and open to error than individual counselling, but which, when it succeeds, is intensely rewarding and heartening.

A NARRATIVE APPROACH

In the workshops on which this book is based I presented narrative therapy to groups of counsellors trained in a wide range of other approaches. Since most participants had not previously heard of narrative therapy they were rather wary, but (as I had anticipated) they found it sympathetic. Although perfectly suitable for use with individuals, narrative therapy originated in family therapy, where multiple viewpoints are taken into account, and course members immediately recognised this as relevant to working with couples. It was different and intriguing, but had enough in common with their usual ways of counselling to form a semi-familiar yet fresh base on which to build new skills in this unfamiliar context. For readers unfamiliar with narrative therapy, Chapter 2 comprises an outline of its theory and main practices; the chapter may be omitted by those already familiar with it.

Although narrative therapy forms the basis of this book, I sometimes suggest the use of practices from other therapies where they mesh with narrative practices and values.

AIMS AND STRUCTURE

I aim to provide a clear, succinct and above all practical guide to couple counselling. Clearly, the book cannot attempt to cover all aspects, and cannot alone teach the reader

to develop full competence – attending workshops and courses, together with good supervision, are essential. However, I hope it will provide a reasonably comprehensive starting point.

Parts I and II describe ideas, issues and practices around this area of work, including an exploration of social and cultural influences on counsellors and couples, and an exposition of narrative therapy that identifies its common ground with other approaches. Part III is the core of the book, the step-by-step, what-to-do ‘nitty-gritty’, where I offer a framework of practice for first and subsequent sessions, transferable to most situations likely to be brought to couple counselling. Part IV extends this overview to consider how these practices may be adapted to several specific situations frequently presented by couples.

Most chapters include experiential reinforcing exercises and/or suggestions of topics for discussion. The role-play exercises which end the chapters on practice aim to reinforce and consolidate participants’ learning around part or all of the chapter’s content through experiential enactment, and to encourage the consolidation of this learning by the interchange of ideas and discoveries arising from the exercises. The topics for discussion which conclude chapters exploring concepts and principles also have the aim of encouraging further thinking and discussion, and of encouraging the participants to relate ideas to the practicalities of working with couples. The exercises and discussion points are intended to be useful for training purposes, but I hope they will also stimulate creative thinking in readers who are using the book as an introductory guide to practice without the assistance of other people.

By the term ‘couples’, I follow common usage, meaning two people who have chosen to form a close relationship. Narrative therapy is also suitable for working with other dyads such as siblings, parents and children, or friends, but I do not include these situations here. I use ‘partners’ as a generic term for committed couples whether or not they are married. Throughout the book, I follow Michael White’s practice of referring to people who come to counselling as ‘persons’ rather than ‘clients’. ‘Counselling’ and ‘therapy’ (also ‘counsellors’ and ‘therapists’) are used interchangeably, and male and female pronouns are introduced at random. All examples of therapy are based on my work with couples unless otherwise stated, with names changed and circumstances disguised to protect confidentiality.

MICHAEL WHITE

Shortly after being contracted to write this book, I was shocked to hear of Michael White’s death from a heart attack, in April 2008, at the age of 59. He was a man of great compassion, and enormous energy and commitment, who loved life and lived it to the full. Michael’s writing, teaching and practice embodied an outstanding breadth of reading and originality of thought, undisputedly making him one of the most important and influential therapists of our time.

