

## **COUPLE RELATIONSHIP ENHANCEMENT THERAPY/PREVENTION: A SKILL-LEARNING PROGRAM TO FOSTER INTIMACY AND STABILITY**

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### **OVERVIEW**

Relationship Enhancement (Ginsberg, 1997;Guerney, 1977) has its origin's in the 1960's with the development of Filial therapy an educational skill training approach that contrasted with the traditional medical model approach prevalent at that time and continuing until today. The assumption in Relationship Enhancement is that most of our difficulties arise from the reciprocal cycles that we have learned and have become habitual in our lives. By practicing constructive ways of relating, these habits will evolve and change into more functional ones. The educational skill-training emphasis of Relationship Enhancement makes no distinction between prevention and treatment. The same model, skills and program could address these differing needs.

Couples, in the Relationship Enhancement Program learn and practice 9 essential skills. These skills are divided into CORE RE Skills and Associated RE Skills. The basic skill training engages couples in an intensive tutorial process in which they learn to how to engage in a safe secure emotionally engaged yet differentiated relationship interaction based on the CORE RE Skills. When they feel sufficiently secure, couples then conduct Audiotaped home practice conversations, which are supervised in sessions with the therapist. Practice of these skills over time is the key improvement of stability and satisfaction in their relationship. Couples are taught these skills singly or in-groups of couples. The structured, systematic and time-designated nature of this approach adds to its efficacy. Extensive research over the last 30 years has supported its power.

There are 5 CORE Skills that comprise the basic skill training. These are **Owning Expressive Skill** (A Speaking Skill); **Empathic Responding Skill** (A Listening and Receptive Skill); **Discussion-Negotiation/ Engagement Skill** (A Skill of Emotional Engagement/Attachment); **Generalization Skill**; and **Maintenance Skill**.

Owning Expression Skill emphasizes the importance of expressing oneself without judgment and by acknowledging the underlying feeling which motivates the expression and gives it meaning. This prevents a person from projecting the responsibility outside oneself onto others; instead the meaning being expressed is connected to oneself.

Empathic Responding Skill is about empathy in the context of listening and was developed because empathy is important in all human relationships. Without empathy, we lose sight of compassion and understanding, are not open to others. When we listen with empathy, we are less likely to judge, accuse or take a one-up position that ignores the validity of another's perspective.

Discussion-Negotiation/Engagement Skill encourages people to respect one another's feelings and vulnerabilities while allowing each person the opportunity for expression and acknowledgment. This skill enables people to sustain the emotional connection between them (attachment security).

Generalization Skill, which is discussed from the very first session, enables people to incorporate the principles and skills they learn in RE into their real everyday lives.

Maintenance Skill assures that people retain their RE skills once the training is completed. Specific techniques and practices are taught to couples to help them maintain their skills over time.

Audiotaped home practices supervised with the therapist leader are an integral part of the program. The secondary skills: Problem/Conflict Resolution Skill; Facilitative Skill, Self-Change Skill and Helping Others Change Skill are integrated in the basic skill training along with practice in generalization and maintenance.

This workshop is relevant for all attendees at all experience levels. The workshop will employ didactic, discussion, role-play and videotape demonstration methods to promote optimum learning.

Ginsberg, B. G. (1997) Relationship Enhancement Family Therapy, John Wiley & Sons, New York

Guernsey, B. G. (1977) Relationship Enhancement, Jossey-Bass, San Francisco

## **EMOTIONAL ENGAGEMENT**

- We live in an ever increasing stressful world.
- Increasing demands on our time and attention make it difficult to find quality time for our important relationships.
- The media, computer and Internet have dramatically impacted the way we engage with one another.
  
- The traditional family form has changed eliciting new ways in which we conduct these important relationships.
- It has become harder and harder for us to remain emotionally connected to each other.
  
- We need to develop ways to find greater intimacy and satisfaction in our important relationships while accommodating ourselves to these significant societal changes.
- Relationship Enhancement is one approach, which helps us to do that.

## **RELATIONSHIP ENHANCEMENT COUPLES THERAPY**

- Emphasis on education versus treatment.
- Not diagnostic.
- No differentiation between amelioration and prevention.
- Structured and systematic.
- Time designated.
- Focus on the importance of significant relationships, on self-development and the process of one's living system.

## **THEORETICAL BACKGROUND**

### **RELATIONSHIP ENHANCEMENT FAMILY THERAPY/ENRICHMENT**

- *RELATIONSHIP ENHANCEMENT IS AN INTEGRATIVE APPROACH THAT IS DRAWN FROM: PSYCHODYNAMIC, INTERPERSONAL, CLIENT-CENTERED, BEHAVIORAL AND SOCIAL LEARNING SYSTEMS PERSPECTIVES*

- *PEOPLE DEVELOP INTERPERSONAL REFLEXES. SHAPED BY EARLY RELATIONSHIPS WHICH IN TURN TRIGGER THE SAME KIND OF RESPONSE IN OTHERS. THIS IS A RECIPROCAL PROCESS OUT OF AWARENESS.*

- *THEREFORE, POSITIVE RESPONSES TRIGGER POSITIVE RESPONSES AND NEGATIVE RESPONSES TRIGGER NEGATIVE RESPONSES*

- *CLIENTS ARE STUCK IN HABIT PATTERNS THAT ARE DERIVED FROM THEIR FAMILY HISTORIES AND BACKGROUNDS ARE INTEGRATED INTO THE HABITS OF THEIR PRESENT AND NEW REALTIONSIPS.*

*LEARNING RELATIONSHIP SKILLS CHANGE HABITS INTO MORE CONSTRUCTIVE ONES.*

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### **FORMATS FOR CONDUCTING RE AND FILIAL PROGRAMS**

RE skill training and therapy is a brief but intensive approach which is followed by supervision of home practice, booster sessions and refresher courses/sessions. The steps for teaching RE skills are:

1. The therapist creates a context that is safe and secure and fosters learning.
2. The therapist models the RE skills to foster a safe, secure learning environment.
3. The therapist clearly explains the values and rationale for learning the RE skills.
4. The therapist explains how the RE skills apply to self-development, interpersonal functioning, and to the specific presenting problem.
5. The therapist demonstrates and models the skills before asking clients to do so.
6. Clients first practice with less serious and/or positive topics before talking about the more difficult ones.
7. The therapist is sensitive to the values and boundaries of RE when supervising client practice and helps clients maintain clear boundaries.
8. The therapist positively reinforces clients during practice, both verbally and non-verbally, to help them improve their skills.
9. The therapist is sensitive to the difficulties in learning the RE skills and systematically increases his or her expectations (successive approximation). The therapist introduces the skills of transfer/generalization and maintenance in the first session and continues to help build these skills in subsequent sessions. Homework and home practice sessions are used for this purpose.
10. After clients have had sufficient supervised practice in the therapist's office, they are asked to practice at home and report on these sessions when meeting with the therapist. In parent-adolescent, couple and family RE training, home practice sessions are audio-taped and reviewed during sessions with the therapist. Parents bring their notes of the home play sessions for supervision, generalization and maintenance.
11. As clients become more skillful, the therapist sees them less frequently and becomes more of a consultant.
12. Follow-up booster and refresher courses are scheduled depending upon client need.

**(Drawn from Ginsberg,1997,p21)**

### **The Basic (10 Session) Filial and Relationship Enhancement Program.**

1. Introduction; review of presenting problem; identification of principles, values and methods of RE/Filial; and demonstration of the process.
2. Review of initial session questions, discussion of any new developments, review of RE principles and methods. The therapist/leader demonstrates the skills. (In the Filial program, the therapist models the play session skills with each child while parents observe. In PARD and couple and family RE, the therapist/leader begins supervising client practice).
3. Same as session 2.
4. The therapist/leader continues to supervise clients in the PARD and RE programs. In the Filial program, parents begin to practice individual play sessions which are supervised by the therapist/leader.
5. Same as session 4. In the PARD and RE programs, clients are asked to establish a regular weekly time to meet to practice their RE skills. In the Filial program, parents are additionally asked to develop a play toy kit for home sessions.
6. This session, devoted to preparing the couple/family for home practice sessions, emphasizes structuring home sessions to assure that they approximate the sessions in the therapist/leader's office.
7. Families discuss their home practice sessions during much of this session. In PARD and RE, audio-tapes of their home practice are supervised to ensure that home sessions approximate those in the therapist/leader's office, and are safe [Barry, do you mean they take place within a safe context?]
8. Usually, a long period of time elapses before this session takes place. During this break, RE enrichment/therapy becomes more consultative than educative, reinforcing the continued maintenance and generalization of the practice at home. Office sessions focus on activities and practice sessions that have occurred between sessions.
9. This session is similar to session 8 though a longer period of time (e.g., 3 – 6 months) elapses between this and the 10<sup>th</sup> session.
10. This session completes the basic intervention program. Clients bring samples of their home practices to the office and discuss any questions that remain regarding implementation of the intervention (including enrichment). Leader/therapist and clients evaluate the effectiveness of the program, identify areas for continued practice, and discuss whether and how the leader/therapist can help in other areas of family life (e.g.,

intervening with other sub-systems in the family; processing new developments in the family with particular individuals; making referrals to other professionals). For example, RE may need to be supplemented by input from medical and/or school personnel and community agencies; specific problems, such as depression, phobia, anxiety, enuresis, sleep problems, learning difficulties may need specialized interventions. Clients and leader plan follow-up opportunities such as booster sessions, refresher programs and various contacts on an “as-needed” basis to reinforce, practice, generalize, and maintain the learned skills.

### **Other Session Formats**

With more than half of all marriages ending in divorce, many new types of families are being created. We no longer assume that children live with their birth parents within the context of an intact marriage until they grow up. Commonly we see blended families in which the children participate in more than one family system; single-parent families with an available or unavailable non-custodial parent; and extended families in which various family members and/or paramours share the parenting function.

It is important for helpers (therapist/leaders) to recognize that even the best intervention program can only be effective to the extent to which degree clients are able to implement it. RE has a strong educational emphasis and depends a great deal on the collaboration between therapist/leaders and clients. Therefore, being flexible and open to other formats that accommodate the various configurations of today’s families can make the difference between a successful or unsuccessful intervention.

### **Intensive Format**

In this format, clients and therapists meet for an initial intensive session that may last longer than usual. The objective is to load the essential training up-front and then follow up with booster and refresher sessions at the convenience of the clients, scheduled on an agreed-upon basis. In the intervening time, clients continue practice and homework activities which are reviewed and reinforced during booster sessions. Should significant regression occur between sessions, a refresher session approximating the initial intensive session can be scheduled; as other concerns arise, booster and/or refresher sessions can be scheduled as well. Once a family is introduced to one RE program, it is usually easy to generalize the principles and skills to other family sub groups and other relationships and problems. **One-day** and **weekend** programs are good examples of the intensive approach.

### **Single Session Format**

The single session format is decided upon based on client need. The session may be scheduled as a double session, or over the course of several days. The RE family-of-origin program (Ginsberg, 1997) exemplifies the value of this intensive format which is designed to help clients become familiar with RE skills and principles. An important component of this format is the development of a structure for home practice, generalization and maintenance of the skill learning. The importance of booster sessions is also emphasized; however, the scheduling of additional sessions is left to the client. In addition, the therapist/leader makes periodic phone contacts to reinforce the skill practice and maintain client contact (this is agreed upon with clients during sessions), and clients are encouraged to maintain phone contact as well.

### **Periodic Format**

This catch-all format includes all other combinations. Consultative in nature, sessions can be scheduled on alternate weeks, or once or twice yearly, depending on client needs and time constraints. All sessions emphasize RE principles and skills, and the value of booster and refresher sessions. The client, however, must initiate these sessions. Periodic phone contact is also maintained. This format is designed to reinforce client practice and generalization and maintenance of RE skills, however regression, stress and conflict can occur motivating clients to contact the therapist/leader. The trust between clients and therapist/leader is an asset when the family or its members experience significant stress or trauma. More intensive sessions can be scheduled to help address these concerns.

### **Booster Sessions and Refresher Programs**

Booster sessions are useful to help reinforce practice, generalization and maintenance of skills and subsequent changes, and all clients are urged to initiate them. These sessions can be used in all formats and are a regular part of RE programs. For optimal outcomes, it is best to schedule booster sessions on a regular basis (e.g., every three months).

If occasional booster sessions don’t sufficiently address client need, a more intensive refresher course of one to three scheduled sessions can be offered. These sessions emphasize skill practice to reduce regression and to enable

clients to regain their mastery of the skills. Refresher courses are offered periodically as a several session program to support and enhance what the family has learned from the RE skill training.

### **Group Format**

One of RE's most salient features is its versatility. Given the cost of therapy, it is more efficient and economical to bring several families together to learn and practice the RE skills. Usually these groups consist of dyads drawn from each family (e.g., couples, parents and adolescents or young children). While multi-family groups can be accommodated, it's advisable to bring in a co-therapist/leader for these cases.

The group format is time designated (e.g., 10 sessions) and membership is closed to new members once the program is begun. Each family can be interviewed before beginning the group to ascertain the appropriateness of the skill training for the family. For example, if one member of the family is in great distress, it may be preferable to meet with this family separately. Other families might feel too embarrassed or uncomfortable with the group format. Sometimes, after the group has begun, stress in a particular dyad can overwhelm the group and undermine motivation. In this case, separate individual sessions with the stressed dyad or family can be scheduled in-between the group sessions. On rare occasions, a dyad or family group whose needs do interfere with the group process will be encouraged to drop out and continue as an individual family or dyad. All groups are structured and include a didactic introduction of principles and skills, modeling by therapist/leader, supervised skill practice by each dyad (family), and home practice with supervision in scheduled group sessions.

It is important to consider that group sessions may not have the intensity of individual family sessions. Group sessions may be best for mildly or moderately stressed families while seriously distressed families may benefit best by an individual family approach. The group format can also be considered as a follow-up to the more intensive individual family format. Certainly booster sessions and refresher programs can be conducted in groups.

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## **PROFESSIONAL TRAINING AT CORE**

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- CHILD-CENTERED PLAY THERAPY
- FILIAL RELATIONSHIP ENHANCEMENT FAMILY THERAPY
- PARENT-ADOLESCENT RELATIONSHIP DEVELOPMENT(PARD)
- COUPLE RELATIONSHIP ENHANCEMENT
- FAMILY RELATIONSHIP ENHANCEMENT
- FAMILY OF-ORIGIN CONSULTATIONS
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- PLAY THERAPY
- FILIAL THERAPY
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### **TRAINING METHODS**

ALL TRAINING AND SUPERVISION PROGRAM ARE DESIGNED TO HELP PROFESSIONALS DEVELOP AND ENHANCE THEIR SKILLS IN CHILD, ADOLESCENT, COUPLE AND FAMILY RELATIONSHIP ENHANCEMENT THERAPY/ENRICHMENT. AS SUCH, DIDACTIC, MODELING, ROLE-PLAY AND FEEDBACK METHODS ARE INTEGRATED TO HELP CREATE HANDS ON LEARNING EXPERIENCE FOR ALL PARTICIPANTS.

*TRAINING IS AVAILABLE AT YOUR SITE*

### **CONTINUING EDUCATION**

Continuing education credits are available for Psychologists, Social Workers, Counselors, Play Therapists and Marriage and Family Therapists.

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