

## HUSBAND AND WIFE AS CO-THERAPISTS

Now that we've been married 50 years, I want to talk a little about the fact that my wife has been a covert consultant and supervisor to me from the beginning of our entrance into the world of psychotherapy. She has had no professional training, but has raised six children, and of course, listened to my need for support and reassurance from the very beginning as I changed from one professional struggle to another. In that sense she has been my co-therapist, although we never talked in detail about cases. My psychological panic after the end of a difficult day or as we proceeded to talk about a difficult patient made her the support system. In addition to that, and much more important, of course, is the fact that work is a function and a role so that my investment in my day's activity, psychotherapy, supervision of residents, teaching medical students was less important to me than my life at home. The power of her care, and concern, and questioning was much greater because the function of husband and partner hopefully is to get closer and closer to being peers. Always there was the undercurrent of her being my mother, and my being the little boy. This made for more power in her participation. In addition, we lived in the long-term development of our relationship and the struggling to be whole person to whole person, not husband to wife or mother to child, meant that the major power in our lives was at home. Furthermore, being parents, and the endless give and take of parenthood with the one, two, three, four, five, and then six children, produced a kind of super function that made the workday less critical. A covert component that's not often talked about is the fact that my experience over these many years has been to become better and better in the role of psychotherapist, what I now describe

more accurately as a foster parent. Whereas her job was less a role, than a profound investment and an expression of her personhood. That is, her interaction carries a great deal more weight for her than my professional function in the office with patients. As the evolution of an empty nest began about 1955 with the first child going off to college, I began to invite her to be co-therapist. I saw a professional therapist and spouse around their marital struggles. It seemed unfair for two men to be paired with one man's wife. It may come as no surprise that her personhood, her spontaneity, and her lack of professional distance made her very powerful and, to my surprise, much more relevant many, many times. In addition there was a strain and, of course, after that a gain in the fact of our we-ness serving as the therapist. In essence, the patients had a set of parents, foster parents, if you will, rather than either two individuals who were making believe they were a team and/or one therapist who was making believe he could switch roles from being the nurturant parent to being the executive parent and back which is not easy and frequently a total failure. Over these last twenty years, we have done more and more co-therapy as a team. Our own coupling becomes a metaphor for their coupling, and their coupling and marital struggles, of course, mirror those of our own marriage. Since the modeling in psychotherapy is always bilateral and the patient is a total person in hopes of becoming more of himself while the therapist, like the parent, is restricted to being in an acting position. He is playing an artificial game of foster parent.

Parenthetically, it's fascinating to think about the comparison between the single therapist working with a couple or even working with an individual patient and the single parent trying to raise a



child without a partner. That obvious cross-generational psychological incest is a profound disturbance whether it's apparent or carefully hidden. The child or, if you will, the patient, must function as a partner to the adult mother or therapist, and the therapist in deference to the generation gap must try many times to empathize with or belong to the younger generation. This makes reverberation like A.A. Milne did so beautifully in his poem, *Halfway Up the Stairs*, you're somewhere else instead, not at the top, not at the bottom. And yet the power of being the single therapist or the single parent is so seductive and so carefully concealed that it's very rare for therapists to team or for a single parent to team with another single parent or with another person so that they have a double life, an adult life, as well as the life of a parent-role function. If we bypass the whole problem of pathology in the therapist or the co-therapy team, there are still many problems involved in the process of trying to imitate parenthood as a professional therapist. First there is the unconscious residual that has to do with factors neither one is aware of, the seductive power of being the therapist and the manipulative power of being the patient or the child are both underestimated in usual thinking about it. In addition to this as we described very carefully in The Roots of Psychotherapy the patient is re-enacting the early life of the therapist, and, if you will, the child is re-enacting the early life of the parent. And in this metaphorical state many things are played upon, hidden, or exposed in distorted ways.

To return now to the gains or functional components in the co-therapy of husband and wife. Most important is the bilateral trust and respect. Marriage can be quantified, and intimacy can be quantified by how much each individual is willing to invest his

individual self in the teaming or the we-ness. And psychotherapy or raising children is certainly a test of this. The freedom to combine and the freedom to individuate is constantly in a dialectic state, and the more the couple, the therapist and/or the patients are able to voluntarily move from belonging to individuating the more ready they are to trust and respect each other.

A secondary problem is that as each therapist is free to recognize the other, there evolves a symbolic unconscious to unconscious relationship with the family of the partner or with the individuals in treatment. The recognition that the transference is a co-transference, and bilaterally quite identical makes for a kind of respect between the therapeutic team and the patient, couple or family.

The third step in this process is the move from a communication model which is dominated by the standard social patterns to an interactional model in which the therapists are able to share their personhood and more and more of their own experience to facilitate and amplify the courage and expression of the patient's pain.

The husband-wife team adds an administrative clarity by their we-ness, and it becomes clear to the patient that all administrative decisions, for example, calls to report anxiety or change the schedule, must be shared with the co-therapist. This not only supplies a kind of strength but prevents the development of the usual abnormal expectations of mother love from every therapist. The marital co-therapy team, of course, adds another dimension of honesty. There is less reliance on objectivity, more necessary openness between the therapy couple, and that warmth carries over to the patient couple or family whether it's coordinate warmth or whether it's the warmth of anger or disagreement between the couple. To say it more openly, love is in the air.

The sixth point in this co-therapy by a couple, a husband and wife, there is a symbolic recapitulation of the actual child raising that the patient-couple live through. This is not just talking to their mother even though she's a foster mother, or their father, it's a living experience that reopens their childhood life experience.

Finally, it's important to recognize that this opportunity of working with a couple or a family in a husband-wife therapeutic team reopens learnings about the empty nest syndrome. It is an experience in saying good-bye with the overtones of death, graduation, running away from home and the other components that make the process of empty nest so powerful.

You will notice that we have not touched an undercurrent which is very critical in any marital situation. The two families of origin are always at odds with each other, and the perception of this by the therapist may not be very accurate, but the perception of it by the patient is frequently very profound even though they may not be able to formulate it or may directly deny it. The two family war is a fact of any marriage, and the two generation war that goes on between parent and children also goes on between his family of origin and her family of origin with the infinite number of triangulations, collusions and teaming that this makes possible even though few or none of them may be exposed or even recognized.