IMAGO
RELATIONSHIP
THERAPY
IMAGO RELATIONSHIP THERAPY

AN INTRODUCTION TO THEORY AND PRACTICE

Rick Brown with Toni Reinhold

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To Celeste,
my wife and passionate best friend, and
to our children, Ryan, Ansley, and Alyssa
FOREWORD

All theory and practice arises in a historical and ideological context, and its contribution to a discipline is best understood in the context that gave it birth. In this foreword, I would like to outline the context within which Imago Relationship Therapy came into being.

In the past three centuries, marriage has undergone a transformation. In prior centuries, generally marital partners were chosen by parents and the marriage was an arrangement between families. Marriage served the social and economic needs of the family and the need of society for the stability of the family. In most cases, marriages were stable and long lasting, and happiness was not a goal. If divorce occurred, infidelity or infertility was usually the cause.

With the rise of democracies and the advent of personal freedom, the basis of marriage shifted from an arrangement between the parents to marriage by choice of the consenting partners, thus reflecting the profound social and political changes in society created by the democratic spirit. In pre-democratic societies, people were “owned” by others and had little freedom of choice; democracy brought with it the idea of the individual and the right of personal happiness. With that idea, people achieved their right to “life, liberty and the pursuit of happiness,” that is, ownership of...
themselves and a full range of personal freedoms, including the freedom to choose whom they would marry. Thus arose the contemporary practice of marriage by choice. The purpose of marriage changed from serving familial and social stability to the satisfaction of personal needs and the pursuit of personal happiness.

Whereas the door to the arranged marriage was the permission of the parents, the door to marriage by choice were the desire of the heart. Romantic attraction and unconscious personal need, not social and economic appropriateness, was the basis of selection. Marriages based on romantic love and personal need were inherently unstable and turned sour because of disillusionment and conflict. The divorce rate rose and a psychologically grounded marital therapy was started. Prior to the founding of psychoanalysis by Sigmund Freud in the late 19th century, couples in conflict were counseled generally by the clergy. The clergy, using the resource of scripture and theology, assigned the cause of conflict to sin and disobedience, and counseled faith to the traditional values of the era of arranged marriages. With the coming of psychotherapy, couples had a second resource and were given a different diagnosis. The first marital therapists, practicing early in this century, following Freud, assigned the source of interpersonal conflict to conflicting intrapsychic energies caused by unresolved issues in the childhood of the individual. The common therapeutic practice was to treat partners separately, usually taking the initiating partner as a client and sending the other partner to a colleague.

The first form of marital therapy reflected the 19th century physics that underlay Freud’s metaphysics and the political worldview that romanticized the autonomy and freedom of the individual and the inherent separateness of all things. At midcentury, the divorce rate reached an alarming high. War brides learned to speak English and expressed feelings in
conflict with those imagined by their husbands. Marital therapists began to multiply in response to this need and experimentation with various forms of marital counseling methods began. Still wed to the idea that interpersonal conflict could be healed only when intrapsychic conflict was resolved, most therapists continued to treat marital partners separately and seldom consulted one another. Some began to experiment with therapist consultations. Others originated four-way sessions—both therapists meeting with the couples. Then some brave souls ventured into the forbidden land of the therapist seeing two people at the same time, giving birth to a radical new practice called conjoint therapy. However, the paradigm of the individual and the need to resolve the deep conflicts of the unconscious as the means of overcoming interpersonal strife held sway. Even then, most therapists lived under the pessimism of Freud’s belief that the most that could be done was to exchange the suffering of neurosis for the pain of ordinary life. Happiness in marriage was still elusive to most of the experts, but it was not surrendered by marital partners.

About forty years ago, a new wind blew across the horizon called systems theory. Marital therapists in droves abandoned the paradigm of the individual and embraced the paradigm of the system. The source of interpersonal conflict was relocated from the deep unconscious and unresolved childhood issues to toxic interactions within the family system. The individual was replaced by the system and a new orthodoxy was born. While this approach and method was very successful with families and beneficial for children in troubled marriages, the couple as the client was not yet a part of the therapeutic process. What was achieved, however, in a large section of the therapeutic community, was a paradigm shift to relationships as the client rather than the pathology of the individual.
Imago Relationship Therapy was born in this environment. Its precursors included not only Freud and the systems theorists but the social Freudians, the interpersonal theory of Harry Stack Sullivan, the I-Thou philosophy of Martin Buber, the social learning theorists, the mystical traditions of the West and the insights of quantum physics. These sources, focusing on the impact of interactions of persons and particles on each other (rather than on the nature of persons and particles), began to undermine the paradigm of the ontology of the individual and the system and gave birth to the paradigm of the ontology of relationship.

Imago Relationship Therapy was not the first marital therapy to view the couple as the client or to focus on the relationship as foundational. But it was the first to assign therapeutic agency to the couple and remove it from the therapist. Building on its psychodynamic base, and incorporating the insight of relationship as foundational, Imago Relationship Therapy shifted the analysis and resolution of the transference from the relationship between the couple and the therapist to the resolution of the transference between marital partners, thus facilitating their use of the power of the relationship as the source of healing. The metatheory that relationship is ontological was translated, on the human level, into the concept of connection. The rupture of connection became the diagnosis of all marital conflict. The desire for marital therapy was viewed as a response to the rupture of connection, and the unconscious goal of marital struggle was interpreted as the yearning to restore and maintain connection. With that analysis in place, the goal of therapy became a process of facilitating the restoration of connection. The experience of romantic love was reconceived, not as infatuation or immature attraction, but as a foretaste of human possibility, and human happiness became an achievable goal. Imago therapists operate from the assumption that when connection
is restored and stabilized, what appeared to be individual or systemic pathology disappears. They believe that the therapeutic method that achieves this healing is a dialogue process that enables couples to break their symbiotic fusion, differentiate as separate selves, drop their projections, and connect with the subjective reality of each other. The observed result includes decreased conflict, increased respect for difference, and the recovery of passion. Partners become passionate friends.

While other books have been written on the application of Imago Relationship Therapy to other contexts and summary chapters have appeared in other books, this is the first full book describing the general practice of Imago Relationship Therapy with couples. Rick Brown is eminently qualified to write this book. He has been an Imago Therapist for nearly a decade, teaching the theory and practice to therapists nationally and internationally, and he has been an able Executive Director of the Institute for Imago Relationship Therapy. I was delighted to learn that he had been invited by the publisher to expand his public lectures into a book. Therapists who read this book will get a general overview of the meta-theory, the clinical theory, and the clinical practice of Imago Relationship Therapy. While reading does not replace the nuances and spirit available only in formal training, it does offer therapists, who wish to become familiar with Imago Relationship Therapy, an accurate and clear guide to its theory and practice. In addition, it is an excellent review for Imago therapists. As the co-originator, with Helen Hunt, of the theory and practice, I am delighted with the accuracy of the presentation and feel gratified that it finally brings Imago Relationship Therapy to the therapeutic community. I give it my full endorsement.

Harville Hendrix, PhD

New Jersey, 1998
Imago Relationship Therapy was developed by Harville Hendrix, Ph.D. in partnership with his wife, Helen Hunt, M.A. It is based on his studies of married and unmarried couples. It is the foundation upon which Hendrix wrote his best-selling books, Getting the Love You Want: A Guide for Couples, and Keeping the Love You Find: A Guide for Singles. Most recently they have co-authored Giving the Love That Heals: A Guide for Parents.

Imago Therapy is a synthesis and extension of the basic interpersonal insights of the major psychological systems and spiritual traditions of our time. It draws on some of the wisdom of Freud and his early followers, like Jung. It embraces much of the learning from people who study early childhood development (such as Mahler, Bowlby, Ainsworth, Stearn, and others). It integrates into its theoretical framework the knowledge of our learning theorists and behaviorists, and it embraces much of what the system theorists have postulated.

At the same time, Imago Relationship Therapy has been shaped and formed by the knowledge gleaned from other disciplines, such as physics, anthroplogy, and cosmology. It seeks to address some of the larger philosophical and spiritual
questions and issues that have preoccupied the learned scholars and the average lay persons of our times.

The theoretical focus of Imago Relationship Therapy is on the unconscious influence of childhood experiences on mate selection and the unconscious desire of adults in relationships for personal healing and self-completion. Personal healing and self-completion have occupied the minds of psychologists as well as theologians. The practical emphasis is on acquiring therapeutic procedures, processes, and skills (such as the Couple’s Dialogue) to help couples create a “conscious marriage”—that is, a relationship in which they are reflective rather than reactive—in which they feel safe and passionate.

The studies upon which Hendrix based Imago Relationship Therapy evolved out of his personal and professional experiences, not the least of which was getting divorced after being married for 17 years. Hendrix, a professor at Southern Methodist University, taught marital therapy to graduate students and was concerned that they would question his ability to instruct them in such a subject after his own marriage failed. He determined to answer one student’s question—why can’t men and women make it together—by studying couples.

In his research, Hendrix aimed to set aside any preconceived notions or attempts to diagnose or label the forces that come into play when couples interact. Instead he listened to them with an open mind, carefully studying their verbal and nonverbal language and examined his own feelings while he explored those of his subjects. What Hendrix perceived and experienced most were images of children fighting or crying rather than adults discussing their relationship problems in his office.

While it was evident to Hendrix that none of the couples with whom he worked enjoyed their combative or hurtful relationships, there was an inexplicable repetition compulsion
tendency at work—that is, an apparent compulsion to repeat an earlier experience or feeling that left a deep impression on them, usually negative, long before they married or became partners. He observed that people tended to return to a familiar place, even if it held unpleasant memories that made them feel uncomfortable.

Hendrix contended that the compulsion to return to such disquieting spaces was playing itself out at an unconscious level. I have come to call this tendency a vu ja de experience and contrasted it to déjà vu, in which people feel as if they have been somewhere or done something before but in actuality they have not. With vu ja de experiences, one knows he or she has been there before and does not consciously want to return, but unwillingly goes there anyway.

Couples studied by Hendrix said they had sought marital therapy for traditional reasons (such as they had outgrown each other, were incompatible, or they no longer found physical gratification in each other). However, Hendrix came to believe that couples were driven to therapy because they unconsciously wanted to escape from their familiar yet unhappy places.

Hendrix believed that the men and women with whom he was working were crying out for help to escape these experiences, but they did not know how to free themselves and neither did he. As he continued his work, Hendrix became convinced that the repetition compulsion was not really a desire to return to that which was familiar, but rather an apparent unconscious yearning or quest to repair an old hurt or wound. The more frequently individuals experienced this “return to familiar ground,” the more desperate their search became, and their relationships became increasingly more unstable and unhappy.

In an effort to help these couples, Hendrix considered the analytic concept that if one can get a person to “work
through” or drop his or her defenses, he or she will return to a natural nondefensive state that is not adversely impacted by past unpleasant or hurtful experiences. But the more he studied couples, the more Hendrix became certain that this was not the case.

Hendrix began to reason that the childhood wounding or deprivation caused a person to create a defensive structure around that emotional wound. This allowed the child to survive in less than ideal conditions. But the child paid the price of being imprisoned in such a defensive state by cutting off access to these emotional areas.

Hendrix further observed that merely working to dismantle a person’s defensive structure did not produce the desired end of resuming the developmental process. The individual who finds himself or herself without defenses is in essence in unfamiliar territory. Hendrix reasoned that someone who had to imprison himself in a defensive posture in childhood merely to survive had not learned how to live, and consequently would not know how to function if he stopped being defensive. Hendrix believed that if such a person was stripped of his defenses, an infantile ego, in which potential had not evolved, would be revealed. This person, whose growth had been arrested in childhood, would be trying to complete the developmental process but not know how.

The process of unconsciously positioning oneself for repeated emotional injuries would lead to a more rigid defense system as one consciously tried to protect oneself from further hurt. The emotional injuries first experienced in childhood would later be experienced in an adult relationship with the intimate other. This would become fertile ground for the scenario to play itself out again and again. This led Hendrix to shift his focus from the individual to the relationship.

This shifting of focus from the individual to the relationship would contrast with most traditional psychotherapeutic
practices that almost always focused on the individual, her internal dynamics, her way of life, family history, and personality. Such practices seem to imply that each of us leads an isolated or independent life devoid of impact from other human beings or influence from the environment.

Conversely, Imago Relationship Therapy is based on the premise that people are not born in isolation nor do they live in isolation. The birth of the self arises in relationship to another. Imago theory puts individuals in the context of the relationship and recognizes the relationship as the primary power in the formation of and the injuring of the self. Thus, the primary power in healing the self will be the relationship.

Rather than seeing individuals as isolated beings, Imago therapists view them in relation to something or someone else. The focus is unequivocally on the relationship, the tension caused by polarities—the presence of two opposite or contrasting tendencies. It is in this tension of “the between” that injury and healing will ultimately occur.

Having practiced for years as a psychotherapist and pastoral counselor, I was first introduced to Hendrix’s ideas when my wife called to tell me she had seen him on the Oprah Winfrey Show. She was impressed he did not appear to offer flip and popular answers to questions about marital relationships. Instead, his answers were well thought out and seemed to offer a depth of thinking around larger issues. I purchased his book entitled Getting the Love You Want: A Guide for Couples.

Although I had read many books in the field of marital and family therapy, I don’t think I had ever read anything that made more sense to me. Hendrix, while heading up the Institute for Imago Relationship Therapy, was conducting two-day workshops, and my wife and I attended one. (Those workshops for couples as well as more intensive programs for therapists are conducted regularly today.
throughout the world by the Institute for Imago Relationship Therapy.)

Although my marriage was good and stable, there was a “stuck” quality to it. I had found myself wondering if it would ever get any better than it was. While we did not appear to be stuck in any intense painful conflicts, there was a sense that the passion or life had gone out of the marriage. In many ways, it seemed we had learned how to settle, accept, or simply tolerate one another.

After the workshop, my wife and I began to apply to our own relationship much of what we had learned about Imago and the various skills and processes that will be described in this book. We began to experience a transformation in our marriage. Because Imago Relationship Therapy was so successful in my own life, it was natural for me to seek training as an Imago therapist so that I could apply it to my own work with couples.

Once versed in Imago theory and therapy, I began to appreciate that couples coming to my office in the midst of pain were really trying to do something much bigger than simply solve daily problems or work out differences with each other. They were on a larger and more profound unconscious journey—namely, to heal and finish their childhoods—that is, to get the needs met that were not met but needed to be met in childhood. Part of my task, then, as a therapist would be to do what Freud had argued all along—namely, help make conscious what the unconscious is trying to do.

My work became tantamount to trying to get couples to swim with the current rather than against it. Whatever their individual problems and complaints, whatever the issues or frustrations—it seemed couples who were locked in such painful power struggles were really trying to unconsciously work something out—namely, heal and finish their childhood. While this might have been the unconscious goal, it
was clear they did not (nor did I initially) have the skills, tools, and knowledge necessary to accomplish this goal.

At the heart of healing is growth and change, but nobody goes into therapy really wanting to grow or change. If people were honest they would admit that what they really want is for their ways to work for them in relationships. If they are interested in change, it is usually in trying to get the other person to change so their life might be even easier and more trouble free.

As one successfully engages in the processes and procedures of Imago Relationship Therapy, healing and growth begin to occur. I make a distinction between healing and growth. I define healing as that state or condition in which your needs are met. In other words, when you actually begin to get from your partner what you have always needed to get but never got, you begin to feel some sense of healing.

On the other hand, growth occurs when you begin to stretch and meet your partner’s needs. As one stretches to meet a partner’s needs, he or she is actually activating a part of the self that has been buried, lost, or repressed for years. In so doing, you start to become all you were meant to be.

This requires a willingness to look honestly at oneself, a willingness to be responsible for the part one plays in a relationship, and a willingness to stick with the program even when it feels as if one is skating on thin ice that may crack and lead to injury. I truly believe anyone can do this if they are given the proper guidance and tools.

I recall when I first trained as a psychotherapist, I was encouraged to remain neutral about any expectations or outcomes in my work with couples. After all, imposing my wishes or desires upon a couple had more to do with countertransference issues, which would only interfere in the work that needed to take place. I no longer feel neutral about whether couples “make it” or not. I feel passionate
that couples will either work it out in their present relationship or they will be working it out in the next relationship. And the price we as a society pay for failed relationships in enormous.

Although not all couples succeed, I still have a strong conviction that the unconscious knows what it is trying to do, and if we are unsuccessful in cooperating with the unconscious agenda to heal and repair, we will pay a price.

To be an Imago therapist is to be a facilitator of a process. The Imago therapist is a coach, not the center of the process or the healer. An Imago therapist is a person who manages a process so that couples are empowered to become each other’s therapists. This is the ultimate goal—to empower the couple to continue on the journey of being each other’s healer.

If the therapist is successful in empowering the couple to be each other’s healer, then the need for therapy is diminished and eventually no longer necessary. Ultimately, couples learn to count on each other in time of need. They see each other as their best possible therapist and they begin to rely on one another.

As one engages in the practice of Imago Relationship Therapy, they come to the awareness and realization that the power of healing is not in the therapist/client relationship. It is in the couple’s relationship. The healing that needs to occur can only occur in the context of a relationship that is similar to the one in which the original wounding occurred. The basis for this argument and position will become clear in the chapters that follow.

Traditional therapists who are accustomed to filling the role of healer may be a bit disconcerted when they feel their role has being diminished as they move toward practicing Imago Therapy. This is a humbling experience for most of us. But if a therapist is willing to stay with this, I suspect
you may have an experience similar to mine, where practicing therapy no longer feels tiring and burdensome. You begin to feel renewed energy working with couples as you empower them to do their own work. With this experience, you feel the rewards that come from helping couples to not only solve their problems, but also help them with the much larger journey of healing and finishing their childhoods.

Rick Brown

Winter Park, Florida
I never intended to write this book. I am a speaker, teacher, therapist, not a writer. However in the course of so many talks and so many clinical demonstrations people along the way encouraged me to “write that down.”

I suppose part of my hesitation was the awareness that once you “put it down” in print, you can’t take it back. With the spoken word, you can respond saying, “Oh did I say that? Let me say it in a different way. Or, let me explain.” But with the printed word there is no taking it back nor is there a chance to explain.

The ideas and clinical examples presented throughout this book demonstrate my deep dependence on so many people. To the thinkers and professors who have helped sharpen my theoretical knowledge and the thousands of couples over the years who have entrusted their relationships to me, I am deeply indebted and grateful. I have truly learned from them all.

I am very appreciative of the hundreds of students I have taught and supervised over the years who encouraged me to write this book. These were bright and capable people in their own right who found a way to thank me for helping them become even more effective in their work with couples.
While I have had the chance to learn from so many, none has influenced my thinking more than Harville Hendrix, who along with his wife, Helen Hunt, is the co-originator of the theory and practice of Imago Relationship Therapy. He is my teacher, mentor, and good friend. One day he will write the definitive text book on Imago Relationship Therapy and we will all be enriched by his genius and generative thinking. In the meantime, I appreciated his encouragement and support in my efforts to introduce some of his thinking through this introductory text.

I wish to also thank Kelly Franklin, senior editor at John Wiley and Sons, who first heard me speak, conceived of the outline for this book, and encouraged me every step of the way. When I acknowledged my inability to write she quickly put me in the able hands of a gifted writer.

I want to say a special thank you to my writer Toni Reinhold. She never gave up on me even when I wanted to give up. Although Toni had never been exposed to Imago Relationship Therapy, she quickly began to understand the concepts and became an enthusiastic supporter of this work. She always found ways to be a beacon of light in an often cloudy mess of ideas and examples. This work would not have been completed if not for her “never-say-die” attitude.

And finally I want to acknowledge the greatest inspiration to me—my wife and best friend, Celeste. When she was not directly involved in the writing of this text, her gentle and insightful spirit was always present. Her spirit has been the fabric and soul that has allowed these ideas to take on a life and passion of their own in our relationship. To be able to write or teach about something that one gets to live, feel, and experience has been the greatest reward.
CONTENTS

Part I  Imago Theory

1  Couples Heal Thyselves  3
2  Imago Relationship Theory  21
3  The Unconscious Mission to Heal  51
4  The Unconscious Impulse to Flee  79

Part II  Imago Therapy

5  The Couple’s Dialogue  97
6  Starting Imago Therapy  111
7  Fostering Healing  133
Epilogue  Becoming an Imago Relationship Therapist  181
Selected Bibliography  189
Index  193
I

IMAGO THEORY
Louise was feeling hurt and frustrated, but mostly she was afraid of her husband, Wayne. His angry outbursts and temperamental tirades had turned their home into a war zone where Louise felt she had always to be combat ready and could never be relaxed and at peace.

She fretted about what she perceived as personality changes in her accountant husband over the five years since they married. He had gone from being a loving, fun, considerate, and attentive partner to being a high-strung screamer whose bad temper could be triggered by the most insignificant things. Wayne’s once thriving business was also suffering under the weight of his emotional upheaval.

Louise, who gave up her career as an accountant to have two children with Wayne, was more concerned about the deterioration of their relationship than she was about Wayne’s business, which further angered him. He reasoned that Louise was able to stay home with their children, doing what he perceived as very little, because he had been so successful. He disregarded her pleas to control his temper
with her and their children, contending that his role as provider entitled him to do whatever he wanted in the privacy of their home.

As she worried about whether she had a future with Wayne, Louise recalled when the two met at a week-long professional conference. Even though they lived in different states, they kept in touch through electronic mail, at first exchanging professional information, then gradually growing closer and fonder of each other until they fell in love and married. She had cherished for the longest time his love letters and the romance that surrounded their brief but intense courtship.

Now, however, the memories were simply bittersweet as she muddled through her own confusion, at times wishing Wayne would not come home while simultaneously fearing he would divorce her.

At first, Louise blamed herself for the changes in Wayne, believing she had somehow failed as a wife. She tried harder to please him by making sure she always looked pretty when he came home from work, cooking favorite foods, calling him during the day, and doing special little things to create a more comfortable environment in their lovely Florida home. But Wayne seemed to notice none of it. Indeed, there were times when he seemed to not even notice her—times when Louise became an invisible partner.

Louise’s loneliness turned into frustration, which she manifested by nagging and complaining as she frantically clung to Wayne and tried to reclaim his affection and attention. But the more she closed in on him, the more distant he became, until the extent of their communication was arguments.

In desperation one day, Louise confided in a neighbor, who often heard the violent quarrels between the couple, that she was growing increasingly afraid of Wayne and feared
he would hurt her or their children. The woman encouraged Louise to seek professional help and contact me at the Institute for Imago Relationship Therapy, where she and her husband had received counseling for their troubled marriage.

Although the problems between Louise and Wayne had escalated to the point where she feared for her physical well being and that of their children, Louise had not waited until now to try to do something to repair her marriage. She had encouraged Wayne over the years to obtain counseling for bouts of drunkenness and his bad temper, and she had assisted him in getting into a program designed to help him deal with the abuse he had suffered as a child at the hands of his parents.

None of these programs had helped Wayne; he was more out of control than ever before. She seriously doubted that further counseling would help him or their relationship, but after an especially traumatic exchange, after which Louise was convinced Wayne was going to leave her, she took her neighbor’s advice and called me at the Institute for Imago Relationship Therapy.

When Louise and Wayne first came to my office, they complained of general marital unhappiness. They were not getting along and were wondering, as many troubled couples do, what had happened to get them to that place.

They had seemed to be so in love, but now nothing between them was working right. Louise’s main complaint was that Wayne was not spending enough time with her or giving her the kind of positive attention and nurturing she craved. Wayne complained about Louise’s nagging and criticism and the general unhappiness she was directing at him.

Wayne seemed like a very angry man, and yet as an Imago therapist, I knew that beneath all anger is hurt—and beneath all hurt is an unhealed childhood wound. This couple was
engaged in an unconscious power struggle in which each was hurting the other and the pain was now manifesting itself in anger and being unleashed in the marriage.

It was evident from the time I spent with Louise and Wayne over several months that he felt a lot of shame because of the abuse that he experienced as a child. And what he was experiencing in his marital relationship was a reenactment of that shame. Every time Louise nagged or criticized him, it was as if his parents were once again saying: “Bad boy, bad. You’ve done something wrong and that makes you bad and you must be punished.”

When Wayne drank and lost his temper, he knew before Louise said a word about it that he was being “bad” and anticipated that he would be chastised for his behavior. So, before he even got to the front door of their home each night, he was tightly coiled and ready to react to the chastisement and “punishment” he expected his wife to inflict on him.

Louise also anticipated Wayne’s behavior and was nervous and edgy by the time he arrived home. Sometimes all it took for the two factions to engage in battle was looking at each other.

It took many sessions before Wayne was able to reach deeply enough inside himself to get in touch with and talk about his childhood hurt, and before Louise was able to understand what he was feeling and relate to him empathetically.

Wayne also came to understand that Louise’s need for attention and nurturing stemmed from the emotional distance that existed between her and her parents when she was growing up. Every time Wayne ignored her or pushed her away physically or emotionally, she was once again an “abandoned” child.

Louise and Wayne achieved an empathic level of communication and understanding over time, but it was heightened
One Couple’s Journey 7

during an especially emotional session at the Institute while they were engaging in the Couple’s Dialogue, which is the heart of Imago Relationship Therapy.

During the dialogue, which will be discussed throughout this book, couples are asked to hold their reactive tendencies and just listen to each other. They take turns mirroring or repeating, as calmly as possible, what each partner says to the other. They then take turns validating the information, once they have sufficient details, by saying they can understand it, or that it makes sense once it does. Next, they empathize with each other, imagining then verbalizing what the other partner is feeling once he or she has reached a point where this can be done genuinely.

The dialogue follows a specific pattern that helps to keep partners from losing control, thereby creating a safe environment in which to communicate fears and hurts, right down to deeper childhood wounds. The Imago therapist acts as a coach, steering the couple through the dialogue that leads to that level of connection.

Louise began one particularly poignant session by telling Wayne that she wanted to talk about his anger and how it frightened her. His initial reaction was hostile—he had heard it all before and did not want to hear it again. He avoided participating in the dialogue by venting about losing time from work to be at the session, but I gently guided them into the dialogue process until Wayne began moving down into his hurt, where healing needs to occur.

Wayne told Louise that when she nagged and criticized him it reminded him of how his parents, especially his mother, treated him. He recalled beatings, other harsh punishments, and verbal assaults that were meted out for actions that were merely the behavior of an average child.

He felt his father had contributed to the abuse by allowing his mother free reign over him and by not intervening to
stop her rash behavior. Both of his parents had had no patience with Wayne, and now, as an adult, he felt that was one of his wife’s biggest faults.

Louise listened to Wayne during that session, her face softening as he tearfully spoke about his relationship with his parents. Her only job during that stage of the dialogue was to mirror, validate, and empathize with what Wayne was saying. So she softly mirrored by saying, “So what you’re saying is that when I criticize you about coming home late from work and missing dinner, you feel as if I’m saying you did something really bad and that reminds you of what your mother said and did to you.”

Wayne would say, “That’s exactly what I’m saying. You don’t ask why I’m late, you just launch into complaining that I am late and that makes me feel like you don’t care what my life is like or what happened to make me late.”

Louise would validate that by saying, “I can understand how my complaining about your coming home late without first asking why could make you feel as if I don’t care about the circumstances that delayed you. That makes sense.”

She would then empathize by saying, “I imagine that when I do that, you feel put upon and as if I’m scolding you like your parents did, without giving you a chance to explain yourself and that makes you feel ashamed and bad.” Wayne responded affirmatively if Louise was correct, or he further explained himself if she was not. They continued this dialogue until they were comfortable that a message had been delivered and understood.

During this ninety-minute session, Louise and Wayne took turns in the dialogue, with one speaking while the other mirrored and validated what was said and then empathized with it. They would then reverse the positions so that each had an opportunity to verbalize their concerns in a safe environment and respond to them without fear.
By the end of that session, they were both calmer than they had been when they began it, and Louise was able to say to Wayne, “This makes a lot of sense to me, especially now that you have taken the time to explain it this way.”

Wayne had not been able to do that an hour earlier, but by staying in the dialogue process, he was able to expose this earlier and deeper childhood wound without fearing that someone was going to throw salt on it by criticizing or ridiculing him. And Louise reached a place where she was able to understand a major source of Wayne’s anger and reflect on it instead of reacting to it. She started seeing her husband differently, or as we say in Imago Therapy, re-imaging him.

**ALTERING IMAGES**

Imago is a Latin word meaning image. It is an appropriate term for this form of couple’s therapy because central to Imago Relationship Therapy is that the images we have of our early caretakers that take shape and form in early childhood are instrumental in the selection of our adult partners. And thus we tend to be drawn to someone who has similar positive and negative traits of our caretakers. This leads to the inevitable reenactment in the marriage of the early childhood drama where the original wounding occurred.

What happens to us early in life is similar to what happens to most animals when they are very young. You may recall the famous research study done by Konrad Lorenz with young ducklings. In that study, he observed that young ducklings very soon after their birth imprint somewhere in their brains an image of the mother duck. The purpose of that imprinting is survival.

If the mother duck wanders off and something comes around a bush that has pointed ears and sharp teeth, the
duckling does not relate to it and moves away from it. But if it walks like a duck, looks like a duck, and sounds like a duck, the duckling will follow it. If the first image the duckling saw was that of the research scientist, the duckling would imprint that image and follow the scientist as if he was its mother.

Human beings do something very similar. Very early in our lives we begin to lay down somewhere in our cortex images or imprints of the positive and negative traits of our caretakers. Parents usually have the most significant impact on us, but if one has older brothers or sisters, grandparents, or an aunt or uncle who help fill the role of caretaker, one also imprints their positive and negative traits. We retain these images throughout our lives.

These images begin to shape and form a composite image of the caretakers. We call such a composite an imago. The imago is made up of the positive and negative traits of all the significant caretakers who were present and influential in the young child’s early development. They are not as crisp as black-and-white photos but are more like impressionistic paintings that one must study for a while to fully understand. As we grow, we begin to unconsciously look for persons who tend to match these images. And this is a paradox.

If you were to ask a person what he or she was looking for in a partner or mate, you would be given a list of positive traits, such as someone who is kind, caring, warm, sensitive, and attractive. No one ever says they want to be in a relationship with someone who has negative traits, such as being inattentive, emotionally distant, and uncaring. Consciously, everyone sets out to find an ideal partner with positive characteristics.

Unconsciously, however, we are looking for someone who matches both—the positive and negative traits of our caretakers.
To explain this, we borrow a metaphor from Sigmund Freud, in which he helped us distinguish the conscious from the unconscious mind. Freud used the image of a rider on a horse. The rider represented the conscious mind and the horse stood for the unconscious. As the conscious mind, the rider knows what he is looking for and what he wants. But beneath the rider is the horse or unconscious, which has a mind of its own.

When one considers the image of a rider on a horse, one must ask who really has the power. The answer is the horse, although it will give the rider the impression that he is in charge. If the horse ever really wanted to, however, it could stop, throw the rider, or run away.

When it comes to relationships, the conscious mind says it knows what it is looking for in a partner and runs down its list of positive traits. But what is the unconscious looking for if it has all the power? What is it trying to do?

Imago theory holds that the unconscious is on a mission to finish a journey that began some time ago, namely to meet needs that were not met, but needed to be met, in childhood. The horse, or the unconscious, will go out in life believing it needs to find something similar to what it had early on so it can complete that journey.

If you grew up with a parent who had some positive traits, such as being a good provider and available, but who was depressed and unhappy, the last thing you would consciously do would be to look for a partner who was depressed. You would run from someone like that if you had any sense because no one really enjoys pain.

Unconsciously, however, you would be drawn to someone who is markedly depressed. You would be drawn to somebody who will inevitably rewound you in ways you were wounded as a child. And if you do not find a way to resolve this and work it out in the relationship, you may end up
breaking up your home, dividing your property. And you will move into another relationship in which you will recreate the identical drama, even if you have sworn to yourself that you will never again get into a similar relationship.

As long as the unconscious knows the old wound has not been healed, it will look for someone who matches the image of the person who initially inflicted the wound, whether it was a parent or some other caretaker, and it almost assuredly will find him or her.

Since a person would not consciously do this to himself or herself, then you must wonder what would or could ever possess a person to be drawn into such a relationship. What power on earth could ever entice or provoke someone into such a relationship? It appears nature came up with a solution to that dilemma: It is called romantic love.

Romantic love allows one to overlook or not even see the partner’s negative traits and instead be drawn into the relationship in powerful ways. There appears to be profound and prophetic truth in the old saying “love is blind.” Romantic love appears to temporarily blind us to the partner’s negative traits.

Romantic love functions in a similar way that anesthesia does. Like anesthesia, it temporarily numbs a person so he or she can go forward with something that is ultimately necessary and good for them. After all if people knew what they were about to get into, the pain they would eventually experience, most people would never take the journey. But the unconscious appears to believe it is not only an important but necessary journey to take.

During romantic love, couples may get a glimpse of some of their partner’s negative traits. However, under the influence of romantic love, they are likely to minimize these traits. Take, for example, the young lover who asks her fiancé a question and he doesn’t respond. She might be inclined to
pass over this lightly, thinking, “I’m sure he has his mind on a lot of things right now. I know when we get married and settled he will be much more attentive.” And so she dismisses his lack of attentiveness.

When the wedding is over and the couple begins to settle into married life, romantic love, like anesthesia, begins to wear off, and the negative traits become visible and more painful.

Now when her husband gets up in the morning and she asks him a question and the only response she gets is a groan, she feels wounded and ignored. She may not know it at the time, but the reason this hurts so much is it probably touches an earlier wound from her childhood in which she often felt ignored or neglected by her own parents. Thus, the childhood drama is reenacted in the marriage.

It is not unusual for couples who experience such pain early in their marriages to make the decision to end the marriage early. And they chose the road of divorce. Many marriages tend to end in the first few years when the romance has worn off and couples begin to feel disillusioned and disappointed that their partner is not all they had hoped.

And yet, our theory suggests if they don’t take the time to work through this stage of their relationship, they will inevitably repeat it in some future relationship. Therapists often see this pattern.

I recall, prior to my practice of Imago Relationship Therapy, working with a couple whose marriage ended in divorce because the husband who was an alcoholic refused to enter a treatment program. His wife had very low self-esteem and was devastated by the end of their marriage. But after a while, she began to build a new life. She got a job and after two and a half years of individual therapy, she thanked me for helping her work through such a difficult time.

We shook hands and terminated our relationship, and I believed I was sending a better human being out into the
world. But, three years later, she called me and said she had remarried and needed my help. After 15 minutes in my office with her and her new husband, I thought, “Oh my, a vu ja de!” She had not married another alcoholic, but rather a very prominent and successful attorney. He was not an alcoholic, but he was a workaholic.

This woman was experiencing the same pain caused by his unavailability and emotional distance as she had with her first husband. By then, I was working with Imago Therapy, so I moved them into the dialogue process and created an environment in where they could not only hear but understand and have empathy for one another’s pain. As time passed, they learned ways to be available to one another in healing ways.

Through the Couple’s Dialogue, she was able to talk about her father, who was cold and uninvolved in her life. He was able to talk about parents who drove him always to be better and work harder and belittled him when he fell short of their expectations. Once they were able to start seeing each other differently—or re-image each other—they were able to get beneath the surface and move down into their childhood wounds where the real healing needs to occur.

RE-IMAGING PARTNERS

One of the goals of Imago Relationship Therapy is to help couples re-image each other. Stephen Covey, in his highly acclaimed best seller, The Seven Habits of Highly Effective People, tells the story of riding on a bus. As the bus stops, a man boards with his two small children. The man takes his seat, crosses his arms, and lowers his head. The children proceed to play with one another on the bus and after awhile begin to move up and down the aisles causing some concern
among the fellow passengers. The man remains slumped over and appears not to be aware of his own children.

As the passengers take note of the man, they grow increasingly angry about his lack of concern for the children. Dr. Covey resentfully decides to do something and attempts to alert the man by touching his shoulder, saying, “Excuse me sir. I don’t know if you are aware of it or not, but your children are beginning to bother some of the passengers, and I am concerned for their safety.”

With that, the man lifts his head and says, “Oh my. I’m terribly sorry. You see we just got on at the last stop there at the hospital where we learned that my wife died. I’m having a hard time, and I suppose they are as well.”

Instead of thinking less of him as a parent and wanting to reprimand him, Dr. Covey is moved to empathy. Why? Because he now has a different image of this man. As a result of this new information, he now sees him not as a “bad man” but rather a “hurting man.”

This is what partners need to be able to do with one another. They need to be able to re-image their partners—not as bad, but as sad or hurting. They will be able to do this when they gather new information about each other.

In the case of Louise and Wayne, we had a hurt little boy, not a bad, mean, ugly man. As Louise began to see that different image, the couple started feeling empathy for each other instead of anger, fear, and resentment. Louise and Wayne ended that especially moving session about which I spoke earlier by hugging each other. They had come into my office not speaking to each other. But when they embraced, I had a sense that they had moved away from a lot of the anger and toward more empathy and they were more connected to each other.

A therapist operating from a different theoretical perspective might have viewed Wayne’s issues very differently,
focusing on his individual problems. Wayne might have been diagnosed as having a possible personality disorder, in need of individual psychotherapy, or perhaps a treatment program for alcohol dependency. These sorts of labels and forms of therapy might have only served to increase his shame and isolated him even further from his wife.

Louise might have been diagnosed as being codependent or passive dependent and referred to a group for codependents, where she would learn ways to cope or take care of herself in the midst of Wayne’s problems. But I suspect such an approach would have done little to help them heal and restore an empathic connection with one another.

Imago Relationship Therapy gave Wayne and Louise a way to address these “individual” issues while, more importantly, allowing them to restore the empathic bond that had been ruptured through the wounding and reenactment of earlier childhood wounds.

Wayne had traveled the full, disheartening route of workshops, programs, self-help books, therapists, and medication and nothing had seemed to assist him in healing at the level in which healing needed to occur. Why? Because the healing that needs to occur will occur only in the context of the relationship with the Imago partner. Since we cannot go back and have our unmet childhood needs met by our parents, the unconscious says, “Don’t worry. I will send you a reasonable facsimile, and you can work it out with him or her.” This is the role of the Imago partner.

We believe that traditional forms of psychotherapy and treatment, no matter how good they are, cannot take a person down to those layers of self where healing needs to occur. Why? Because most therapists are not Imago matches for their clients. And if they are, they usually end up in power struggles with someone, ultimately ending the relationship or inappropriately crossing a professional boundary.
In Imago Relationship Therapy, we do not seek to isolate relationship problems in a traditional sense. Rather, we see relationship problems in a relational context. Again, the self is formed and shaped in the context of a relationship. Therefore all wounding occurs in relationships, and consequently all healing must occur in relationships. Such healing will not take place unless a couple is in a safe environment. In the Imago model, couples begin to establish a sense of safety through a process called the Couple’s Dialogue. We will outline this process in more detail in Chapter 5.

Wayne had been extremely angry when he came to my office for that pivotal session. He kept avoiding the dialogue, slipping into the old rage and visibly frightening Louise. In such instances, it is important for the therapist to remain a firm and steady safe presence. If the couple is unable to engage in the Couple’s Dialogue because defenses are high, the therapist will need to engage with first one and then the other in dialogue. This will help calm the couple, relax their defenses, and enable the process to continue between the couple.

Until Wayne was able to engage in dialogue with Louise, it would be my task to engage in dialogue with him. This would enable him to stay connected while providing some support to Louise. Every word I spoke was simply a mirror back to him until I could genuinely validate and then be empathic. But unlike traditional individual and even some couple’s therapy, I was not interested in having him talk to me to address his individual concerns. I was simply engaged in a process that would provide some boundaries and safety so the process could eventually be handed back to the two of them.

The Imago therapist does not analyze, diagnose, or try to interpret what makes a client act a certain way. Instead, the
Imago therapist does what he tries to teach couples to do—engage in the process of the dialogue. This dialogue is based on mirroring, validating, and empathizing.

With Louise and Wayne, I was certain that if I stayed with them and kept them in the dialogue, despite his rage and the pain they both felt, I would be able to move them not just to the expression of anger, which is detrimental, but from the anger into the hurt. As one is able to move from anger and rage, down into hurt, and into the earlier childhood hurt, empathy seems to be available from the other partner. This experience of empathy from and toward one another is what ultimately leads to healing.

The heart of Imago Therapy is helping couples learn to safely connect to each other and have more empathy for one another’s pain through the specific intentional tool—the Couple’s Dialogue. Couples tend to relax defenses when they engage in the dialogue process as they begin to experience safety, which allows a beginning for the healing that is trying to occur.

While we will talk in more detail in Chapter 6 about the initial interview and first contact with a client, it is worth noting here that from the time couples enter an Imago therapist’s office until the time they leave, they are in the dialogue process. Couples are encouraged to stay in this process after leaving the office. While it will take time for this to become a part of their daily living, this is the ultimate goal.

Whether you are a therapist or client, learning to use the process of the Couple’s Dialogue is not easy. Like learning anything new—piano, riding a bike, or skiing, it is difficult and frustrating. As with skiing, you must master the skill of snow ploughing before trying to ski. If you practice snow ploughing every day on a beginners slope, you can eventually go up a lift and ski down a more challenging slope.
Teaching couples to communicate on a daily basis through dialogue, thereby creating a safe environment in which they can live and work, is a very slow process. But just like snow ploughing, if it is practiced, eventually it becomes more natural and they are able to take on more difficult and challenging slopes.