Some call it love: Exploring Norwegian systemic couple therapists' discourses of love, intimacy and sexuality

Anne Kyong Sook Øfsti

A thesis submitted in partial fulfilment of the requirements of the University of East London and Tavistock and Portman NHS Foundation Trust for the degree of Doctor of Systemic Psychotherapy

### Acknowledgments

Although I am solely responsible for every one of the 70 000 words of this thesis, writing it would have been impossible without support from many people around me.

First, I want to thank the former Head of Diakonhjemmet University College in Oslo, Norway, Einar Vetvik, for his support and for offering me the possibility of doing this doctorate. I wish to thank the new Head, Harald Askeland, for continuing to support my project. Karin Kongsli as the head of the Department for Continuing Education in which I work, has also given me much encouragement.

I would never have entertained the idea of doing a doctorate, and absolutely would not have survived the process of writing this thesis if not for the "Tavi-group" from Diakonhjemmet University College, including the late Roar Flatebø, Håkon Hårtveit and Per Jensen.

Other colleagues, such as Randi Bagge and Anne Hedvig Vedeler have followed me closely throughout the process of becoming a researcher, always offering fruitful dialogues and good food and wine.

I have had excellent help with producing the English text, first from Michaele Ramberg and subsequently from Kirsten Schou. Kirsten has also been an exceptional supervisor in helping me to turn my implicit thinking and messy English into academic research language, word by word.

The library at Diakonhjemmet University College with Hilde Trygstad, Kari Kalland and Margit Aalrust has been most helpful in encouraging me to ask for everything I have needed in the way of articles and books and have been most helpful in getting me almost all the literature I have needed.

The Tavistock Clinic and staff need to be acknowledged in this research project. They include David Campbell and Charlotte Burck who have always been constructive in their comments.

During this research process, I have had fruitful discussions with other couple therapists. I want particularly to thank Drammen Familiekontor and Grenland Familiekontor in helping me hold my focus on all the practical dilemmas concerning and curiosity about "what is couple therapy?" I have also had practical and economic support allowing me some time off just to write in solitude. Thanks to Dr Holms, Geilo and NFFT for supporting me in this way.

I have had the pleasure of having two supervisors at the Tavistock: first Arlene Vetere without whose support I would not have managed writing the Proposal – her patience and help in formulating my original research questions were much appreciated. Bernadette Wren has been

my supportive and enthusiastic supervisor, clear about what does not work in English, and very helpful in getting this thesis from the idea stage to the concrete result. My Norwegian second supervisor, Wencke Mühlausen, introduced me to poststructuralist literature and convinced me several times that this research is political and needed to be done.

The interdisciplinary research group The Queer Turn at the Centre for Women's Studies and Gender Research, University of Oslo, has been inspiring to join! Thanks to all the participants.

My family, Liv, Einar, Robert, Sara Birgitte and Inger Marie has been supportive all these years in different ways. Ikhlaque has been the most faithful friend one could wish for. All my kindred friends offering chats, wine and food – and a humorous angle on my serious research, I am in dept to you all – and you know who you are.

Lene has been my dedicated partner and inspiration and recognises all the discourses of love in practice. Miss Blaise, my beloved internet relation with whom I have discussed love and

intimate relationships, has been there for me all these years offering a space for creative and uncensored dialogues that override all my former ideas about how communication can facilitate new ideas and curiosity.

However, the participants' generosity and confidence in the aims of the project has been its cornerstone. My deepest thanks go to all of them, really, thank you again!

Anne Øfsti

Diakonhjemmet Høyskole

Oslo, March 2008

This thesis is a qualitative study based on interviews and video material, of five therapists conducting couple therapy. Norwegian systemic couple therapists' discourses about love and intimate relationships have been explored with the aim of shedding light on couple therapy as a professional field in which discourses about love, sexuality and intimate relationship are drawn on, exchanged and negotiated. The method of analysis is discourse analysis, and poststructuralist theory has informed the design and underpinned my epistemological stance. A main issue has been to explore how systemic couple therapists occupy a position of power as clients' expectations of them as professionals are linked to notions of objective knowledge. This is simultaneously a challenge because most couple therapy issues are discursive. I have looked specifically at how a discursive dynamic has unfolded in couple therapy and how dominant discourses of love, as for instance 'the romantic,' stabilize and reproduce heteronormativity. This analysis is intended to provide new insight into the field of systemic couple therapy practice in relation to the importance of self-reflexivity. The limitations of the study are discussed, reflexivity issues are explored and ideas for further research are proposed. The implications of the study for therapeutic work with couples and training of couple therapists has been elaborated.

### **Table of contents**

Acknowledgments
1
Abstract
3
Table of contents
. 4
Chapter 1: INTRODUCTION
9
Background for research interests
9
The development of the study
Guide for the reader
Chapter 2: INTRODUCTORY LITERATURE REVIEW
Studies of love

12
Early research on marriage and couple therapy practice
The advent of systemic couple therapy
'Couple therapy'
The interactional perspective
Contemporary systemic couple therapy
The dialogical/collaborative approach
Tom Andersen and Norway
Tom Andersen and Norway
23
The wider couple therapy field
Summary
24
Chapter 3: LITERATURE REVIEW
26
Part I: A conceptual overview of theories of marriage and intimate relationships
Premodern time – passionate love

Late eighteenth and nineteenth century: love as romance	
The advent of the nuclear family	
Democratisation theories of love – contemporary love ideals	
Giddens and 'the pure relationship'	
Discussion of Giddens' concepts	
Beck and Beck-Gernsheim: The normal chaos of love and the "New Era"	

Discussion of Beck & Beck-Gernsheim and the democratising theory of love
Discussion of Evans' Analysis
39
Margaret Wetherell: Romantic Discourse and Feminism
Summary
40
Part II: Poststructuralist theories of sexuality and intimacy
Foucault and the archaeology of sexuality
41
Foucault's theory of sexuality as a frontrunner to contemporary couple therapy 43
Critique of Foucault's theory of sexuality
43
Hollway - gendered subject positions
nonway - gendered subject positions
44
Butler - Gender as a fictive construct
46
Summary and discussion of the literature Review
Chapter 4: METHODOLOGY
50
What was learned from the pilot study?
50
Initial plan for data collection

51
The experience of the IPR method and the process of interviewing
'Content' or Discourse?
53
Self-reflexivity and the pilot study
55
Design
Ontological and epistemological stance
Qualitative Research
57
A systemic perspective
58
Sampling strategies and Sampling criteria
Data and the data collection process
C1
In-depth interviews
depen interviews
61
Analysis: Towards a poststructuralist approach
65
Foucault on knowledge and power
Discourse Analysis

# Ethical considerations .....79 Doing research on sensitive topics ...... 79 Reflexivity ..... .....81 Validity, reliability and trustworthiness ......86 Limitations of the method ......87 Summary of Methodology ......88 The T-construct ......90 The organisation of the material ......90

Chapter 6: BEING IN LOVE

Choice of extracts

92
Introduction: The discursive function of being in love in late modernity
A conceptual account of being in love in late modernity
Giddens: the pure and the confluent
94
Being in love as a natural phenomenon
95
Platonic Kindred Souls
97
"Narcissus and Freud"
The "At-stake"
. 100
Please Do Not Disturb
Was it Worth It?
Window Shopping
Discussion of Being in Love
404

Summary: Being in love
Chapter 7: LOVE IN DOUBT
Romantic love
. 108
Virtuous love
Natural gender differences
443

## Heart of hearts The good ol' days Labour of love ..... . 116 Yes, but Love Hurts Discussion of love in doubt Summary: Love in Doubt Chapter 8: LOVE IN DANGER Introduction: Infidelity Tracking the discourses

Echoed discourse about gender and motherhood
Discourse and counter-discourse
140
Hearts trump
Separate parental and couple issues
Constructing advice-giving as acceptable and unacceptable
Dead relationships
"Just do it!"
144
Drawing the line
Discussion of Love in danger
Discussion of Love in danger
Summary
151
Chapter 9: DISCUSSION
Summary of research process and key findings

'At stake' issues
Between everyday discursive knowledge and professional 'expertise': the twilight
zone
154
Identifying evaluative speech about couples

Chapter 1: INTRODUCTION

Background for research interests

What kinds of questions does this research address? My first and most direct answer is the question of how couple therapy as a field can improve so clients can be helped in the best possible way. I realize that this is a naïve and overly simplistic formulation for a thesis, but initially my linguistic resources when starting work on the research proposal were simplistic and naïve. However, when the aim of my research was to improve the practice of therapy, the concrete choice of research interest lay within my own experience as a couple therapist and in the fact that I often found myself drawing on my own ideas about love more than on a recognizable systemic theoretical framework; the initial background for my research interest is my experience as a couple therapist. I began to notice that whenever clients came to me at a critical crossroads in their life together, their "destiny" and choice of direction partly lay in my hands as a professional. In such cases, I started to observe myself to explore the professional ideology underpinning my work.

In other words, I became curious and attentive toward what I draw upon as a couple therapist once I recognized that I do not draw systematically upon traditional therapy theories such as psychodynamic approaches, behavioural therapy or cognitive approaches.

My not drawing upon traditional therapy models is not exceptional as I am trained in systemic family therapy; however, I became uncertain of what a systemic approach to couple therapy

includes. In fact, I became aware that I talk mostly about movies, novels, friends' experiences and an exploration of the couple's own narratives and experiences. As I became aware of this less systematic theoretical influence when doing couple therapy I started to question why I was less concerned with traditional therapy theory in the particular work of couple therapy, and my impression initially was that my Norwegian colleagues more or less talked about the same experiences as mine. On a more overarching level I wondered if it is the case that Norwegian systemic couple therapists generally are less informed by research and academic literature compared with practitioners of other approaches in couple therapy, such as psychodynamic couple therapy. If so, might it be the case that the notion that systemic therapists are less informed by theory is specific to the field of couple therapy? And finally, if it is the case that systemic couple therapists in Norway are less informed by research and

theory in their practice of couple therapy, what then are systemic couple therapists drawing on

when conducting couple therapy?

I then ended up with two particular but related research interests. First, I was interested in exploring the different kinds of professional knowledge in use and the intersection of various traditions informing couple therapists, and I had the idea of doing a meta-analysis of theory in use in systemic couple therapy. Related to this mapping of knowledge in use, I then wanted to explore therapists' own "love images" with a phenomenological approach. However, as the research process developed I found that mapping professional knowledge and therapists' love images was too narrow a focus as I became more interested in how couple therapists operate in the intersection of therapy theories and images of love. My focus changed then towards a study of how various discourses are taken up and used in different contexts of meaning. This shift of interest launched me into a different research design but did not require me to leave the initial research focus. I account for this shift below and in greater detail in the Methodology and Discussion chapters.

The development of the study

Two incidents in the early phase of this research process shaped and reshaped my research focus: the first was explication of concepts as a result of "carving out" my research focus while the other was my experience with the pilot interviews; I will briefly account for them both. In the process of clarifying my research focus I realized that it was not only a question of content in couple therapy which engaged me but a particular kind of content in couple therapy, which I labelled "at-stake issues in couple therapy". By at-stake issues, I mean therapeutic issues which arise when a couple therapist is faced with 'overarching' questions about love and intimacy, questions and themes that by their nature are more philosophical and

existential than primarily psychological or therapeutic. These questions emerge as real

dilemmas first when couples are in situations where they must or think they must make choices regarding a change of direction in their life. An example of such a question is, "can one live in a relationship when one feels love has gone?" The process of formulating my research interest as one of at-stake issues in couple therapy lead to the realisation that the initial phenomenological focus was not optimal, as these at-stake issues as I see them are related to ethical and cultural dilemmas and paradoxes more than to a phenomenology of ideas and beliefs about love. The second but related incident was my direct experience of the

pilot study, which strengthened the more discursive direction my research had taken. In the pilot interviews, participants drew on multiple, contradictory and dilemmatic descriptions of love to such an extent that I became absorbed in examining the overarching level of interplay of discourses and knowledge in use, rather than merely the fine-grained level of beliefs, opinions and images of love. Changing my design lead me in turn to literature that displayed a more discursive approach to the study of love, intimacy and sexuality (see Literature Review, Chapter 3) that then influenced my research focus further.

#### Guide for the reader

I have organised this thesis 9 chapters including the Introduction. The Introductory Literature Review is meant to offer a context for how and why the research questions were initially developed, and provides an overview of studies of love and the history of couple therapy, and of systemic couple therapy theory in particular. The Main Literature Review (Chapter 3) presents sources that have had a bearing on my thinking. This is followed by a Methodology chapter in which I provide a description of the design of the study, details of the participants and of the method of gathering the data. I then describe the analytic method of discourse analysis and make the case for its appropriateness as a research methodology in this study (Chapter 4). Following that, I present three chapters that together contain the analytic results of the study in detail: 'Being in love' (Chapter 6), 'Love in doubt' (Chapter 7) and 'Love in danger' (Chapter 8). The structure of these three chapters is alike, as they start with an introduction, go through the findings and conclude with a discussion.

In the last section of the thesis, the Discussion Chapter (Chapter 9), I first summarize the main findings of the study. I follow this with an outline of some ideas for further research that emerged from the work reported here. Then I explore the implications of the study for therapeutic work and conclude with a discussion of the limitations of the research. Finally, there is a coda in the form of a little narrative that I have called: "A short meeting with a gypsy woman, Rose and her tarot cards." It may be a relief to the reader to be reminded of yet

another way of voicing the discourses of love.

It is possible to read the different chapters independently, to a certain extent. If the reader is mostly interested in the analysis and the implications for practice, s/he might study the analysis and the discussion chapters. If the reader is more academically oriented, the literature review and discussion could be most relevant.

In this Chapter I present some of the literature I reviewed in planning my research. The aim is to contextualise my initial research question; although I changed the initial plan, this introductory literature review has relevance in demonstrating how it became problematic to go on with the initial research project and how my reading of this literature has premised and extended my understanding throughout the process and outcome of the research. In orienting myself within the literature to develop my research questions, three areas were particularly relevant: literature about love, early research on couples and couple therapy history and finally the history and status quo of the Norwegian systemic field of knowledge and practice within which my research participants are working. In the subsequent Main Literature review I will present literature related more closely to the Analysis, Method and Discussion Chapters. I am aware that I am the narrator of the literature presented here with the aim of clarifying my research focus.

Studies of love

Research on relationship beliefs and love that asks the question, "What is love?"

One of the dilemmas about "love" is that it is a self-evident, transparent notion and belongs to everyday language, and is therefore at once both "empty" and saturated with meaning.

Initially in planning this thesis I was concerned with exploring a) research that accounts for beliefs about love and intimate relationships, since love and lack of it is one of the most obvious issues in couple therapy, and b) literature exploring what love is connected to my initial research focus on how therapists think about love. In classical literature about love, many conceptual/philosophical distinctions between different kinds of love are made - eros, agape, storge, and philia, while psychology offers several ways of drawing a typology of love

(see for instance Sternberg, 1986, Hendrick & Hendrick, 1986, 1989). What these approaches have in common is a view of love as a phenomenon that can be explained and explored in realist terms. The view of love as something one can frame in substantive terms informs an essentialist approach to the study of love, where the word 'love' denotes something that exists, more or less independent of the observer. An example of such essentialist research in psychology on love is a volume of papers edited by Sternberg and Barnes (1988)i. The stated aims of this volume are to present love from the perspectives of different contemporary

psychologists whose field of expertise is the study of love and close relationship in order to establish "just what love is" (ibid:3).

In this task, Sternberg and Barnes have recruited contributors from among social psychologists, the fields of infant-parent attachment, cognitive psychology, psychometry, evolutionary biology, social network, cultural anthropology and behavioural psychology, reflecting manifold approaches to love within psychology as a profession. In the preface to the book, Rubin claims that "the science of love is still in its infancy" (ibid:viii) and notes the problem that scientists share little common vocabulary. Love means different things to different people; some think of love as an attitude, others as an emotion or a set of behaviours,

but, as Rubin asks, "How can we proceed to organize our study of it?" (ibid:viii) This same challenge applies also in therapeutic practice, where both clients and therapists draw on different linguistic references to love. However, a limitation of such studies for therapeutic aims is that although therapists might be enriched by these many accounts of love, in their therapeutic work love cannot be mapped out easily or categorized into prototypes as it is also denoted in terms of specific practices. "Love as doing" requires further exploration, as lovepractices

are manifold, contradictory and positioned. The dynamics of love must be a focus rather than the production of categories, descriptions and typologies that seek to capture love as a phenomenon upon which we can all agree.

Another example of research on love that takes an essentialist approach is the article by Sprecher & Metts (1999), 'Romantic beliefs: their influence on relationships and patterns of change over time.' This is a longitudinal study using data collected from a sample of romantic couples at Illinois State University. The sample consists of dating couples who had completed a self-administered questionnaire during the period 1988 to 1992. What this study measures is a) the connection between romantic relationship and love for a partner and b) how

stable romantic relationships remain when challenged by changing experience, e.g. passage of

time and relationship transitions. iiThe categories described in the article are 'love finds a way', 'love at first sight', 'one and only' and 'idealisation'. These are useful categories for further research, as they are recognizable in a common-sense way of speaking about love. However, I question research that aims to categorise and measure love. Longitudinal studies and scales have relevance up to a point, but an individual's nuances, reflections, narratives and ideas about love might 'disappear' within overly broad categories. A potential strength of

the research reviewed above is that it presents a rich variety of concepts and ideas about love. On the other hand, it might be argued that literature which attempts to describe love in essentialist terms turns out to say nothing more than that love is whatever measures of love measure. I have come to believe that ideas, beliefs and discourses of love in the end are cultural constructions, and research on love should include the cultural and contextual premises built into the research. Research on love with the aim of offering a repertoire for couple therapy might be helpful in enriching therapeutic reflection over the complex language of people's experiences of love. I argue for the need for love research that can account for how and why talk about love changes, both at the level of the individual over the lifespan, and also at social and cultural levels. As I see it, the mainstream research and literature about love in psychology is too narrow in providing a conceptual framework useful to development of a research process taking a more discursive approach to love.

Early research on marriage and couple therapy practice

It was important in planning this thesis to explore why research on marriage was initiated at all, since the emergence of marriage as an object for research suggests a research agenda; marriage ceased to be a taken-for-granted institution when it became a troubled one, and of interest for governments to invest in marriage research. The same applies to couple therapy practice: it began with the notion that marriage needed some kind of assistance. In the following I explore the parallel development of a dominant research agenda for marriage and couple therapy, because I want to show the historical connection between a societal agenda of investment in marriage as an institution, and marriage research and therapy; there seems still to be a powerful connection between this societal agenda and the practice of contemporary couple therapy. The relation between dominant cultural discourses about love and how these unfold in therapy is the heart of my research agenda. Another reason for including the history of marriage research and therapy here is that although discourses of marriage informing marriage therapy have changed continually since 1930 (Gurman & Fraenkel, 2002) it is likely that some of these ideas and values are still informing contemporary couple therapy practice:

how has the history of marriage research affected the practice of contemporary systemic
couple therapy?

The historical motivation for making marriage a research object was the increasing rate of divorce during the latter half of the 20th century, when divorce replaced death as the end point

of the majority of marriages in Western Europe and the USA (Pinsof, 2002). Within marriage research there have been two main traditions: one with a focus on personality and the other taking an interactional perspective (Gottman & Notarius, 2002). Both traditions attempt to explain how marriages fail, and these explanations influence in turn what marriage and couple therapy should be about. The interactional perspective however represents both a conceptual breach with the personality-based tradition and is the starting point of the systemic perspective. I account for the interactional perspective in the section 'The advent of systemic couple therapy'.

The personality-based research perspective was promoted in a book on marriage research by Terman et al. in 1938 (quoted in Gottman & Notarius, 2002) that proposed one main research question: "What is fundamentally different about happily and unhappily married couples?" (ibid:159). This focus has to be seen in relation to the emphasis of the 1930s on personality theories in psychology or human science. Marriage research focused on the identification of personality traits ideally suited for successful marriage. The method for the first published research required respondents to sit with paper and pencil and report complaints as well as satisfactions. The research of Terman et al. (1938) did not find evidence to support a personality profile that matched partners in happy marriage iii and is an example of the limitations of research on personality traits with a focus on satisfaction in relationships. This isolation of relationship satisfaction as something that can be measured and that is "inside" a person does not, I would argue, take account of the broader cultural context of expectations, gender, economic and work factors. This research attempted to 'do something' about the divorce statistics by providing an analysis of why marriages fail in many cases, while placing the blame for divorce on the individual and emphasizing the value of searching for personality

characteristics. It is interesting to consider how much this focus on individual responsibility for happiness in marriage and couple-hood continues to influence couple therapy today. At the same time, marriage became an object of psychotherapeutic intervention with the aim of supporting people in preserving and "surviving" their marriage happily. I see a parallel between personality-based research and the birth of marriage therapy. It is interesting to

recognise that the dominant discourse in personality-based research of individual traits is still a significant discourse. A key analytic question for me has been that of how this research still influences couple therapy practice.

The emerging field of marriage and couple therapy

The relevance of a historical account of couple therapy is that the predominant ideas and methods that have influenced early couple therapy phases still influence the contemporary systemic couple therapy field. According to Gurman and Fraenkel (2002) couple therapy is "long on history but short on tradition" (ibid: 199) and this provides background for my impression of a less theoretically informed systemic couple therapy. Gurman and Fraenkel identify fouriv distinct phases of the development of couple therapy. The first two phases have particular relevance for this thesis as they describe initial practice of couple therapy and the influence of psychoanalytic ideas on the field.

The early period of marriage therapy in the US in the period of 1930-1963 was the atheoretical marriage counselling period (ibid) and according to Gurman & Fraenkel, the first marriage counsellors were people for whom counselling was a supplementary activity to professions such as social worker, clergyman, obstetrician- gynaecologist and so forth, and clients were previously married, newlyweds and couples seeking guidance about everyday married life (ibid: 205). This interdisciplinary nature of professionals doing couple therapy is similar to the contemporary situation in Norway, as family therapy here is an additional qualification built on other professions such as social worker, psychologist, priest, nurse and sociologist to mention some. The everyday topic of how to manage in marriage as a main focus for counselling is also recognisable within contemporary couple therapy practice. One difference, though, is that historically the aim was first and foremost to help people endure their marriage,v while currently in systemic couple therapy, the issue of whether or not to stay in a relationship is equally relevant. At the same time, as early marriage therapy was atheoretical, psychoanalytic experimentation (1931-1966) began to influence couple therapy

(ibid). Psychoanalytic explanations framed marital struggles as a neurotic interaction of the partners and as a result of psychopathology in one or both partners (Manus, 1966).

Psychoanalytic writers were interested in the processes of mate selection, the meaning of marriage in family life, and the effects of psychoanalysis on the partner (Meissner, 1978). An example of psychoanalytic experimentation with marriage therapy by Mittelman (1948) was a

significant development, especially in terms of therapeutic efficiency. Mittelman conducted "simultaneous" treatment, in which the same therapist treated both partners individually but synchronously (Greene, 1965, quoted in Gurman & Fraenkel, 2002). For Gurman and Fraenkel, psychoanalytic and psychodynamic thinking did not become central to the development of marriage therapy: I think this claim is debatable.vi I argue that psychoanalytic terms are part of our current popular and clinical vocabulary and thereby also present as therapeutic discourses among systemic therapists. The grand narrative of psychoanalysis is so deeply entrenched in our culture that many practitioners and clients continue to equate a psychodynamic conceptual base with the entire project of psychotherapy. To understand this, we can reflect on the idea of "looping effects" (Hacking, 1986, 1995), an explanation of how people adopt terms from professional, often scientific models, and begin to act in accordance with these terms, making them true and "alive." I think that is what has happened with the psychoanalytic narrative; people act as if this grand narrative were true and begin to see their symptoms as "real" through such looping effects. The questions for my project are how and when are these psychodynamic terms employed by systemic couple therapists, and what are the consequences of applying them? Might it be that in the absence of a common theoretical base in systemic couple therapy, the systemic therapist aspiring to position herself as a serious professional sometimes imports a psychodynamic frame of reference?

The advent of systemic couple therapy

There are various ways to narrate how systemic couple therapy was initiated and developed. For the purpose of this thesis I emphasise the interactional perspective and look briefly at the relationship between systemic family therapy and systemic couple therapy. I begin with a short explication of the term 'couple therapy'.

'Couple therapy'

The term couple therapy has come to replace the historical term marriage therapy more

closely associated with the traditional concept of marriage as an official tie between husband and wife, with its attendant conception of the central goal of couple therapyvii as helping the marriage to endure (Gurman and Fraenkel, 2002). How then is couple therapy different from, for instance, whole-family meetings, individual sessions, pre-emptive intervention, separation and divorce therapy? I realise that all these variations can be labelled couple therapy; however what I focus upon in my research is couple therapy as conjoint therapy (Jackson, 1959) in

which both partners are in therapy with the aim of repair or improvement of their relationship (Jackson, 1959 cited in Gurman and Fraenkel, 2002).

The interactional perspective

The classic double-bind study described by Bateson, Haley, Jackson, and Weakland (1956) in Towards a theory of Schizophrenia introduced an interactional perspective of family relationships that emphasised that personal distress should be understood in a relational context and not as a symptom of personal dysfunction, with the aim of identification of patterns of dysfunctional communication within families and couples. This interactional perspective emerged as a conceptual break with the personality-based tradition and represents

for many the birth of systemic thinking. Fraenkel (1997) claims that; "systems approaches developed in large part as a reaction against the perceived limitations of therapies that attributed psychological and social dysfunction to the problems solely within the individual, whether these were viewed as biological, psychodynamic or behavioural in nature" (Fraenkel, 1997:380). Family therapy's overt rejection of most psychodynamic theories and principles (Gurman and Fraenkel, 2002) may explain why there is today a strong division between those who subscribe to a psychodynamic approach and those who are systemic in Norway.

There was, however, a conceptual weakness in early systems theory (Gottman & Notarius, 2002). An example of one shortcoming in systemic theory was the lack of universally defined concepts, leading to diverse interpretations by practitioners. Among the many different theoretical descriptions of "dysfunctional", for example, were 'double-binding messages' (Bateson, Jackson, Haley, Weakland, 1962), 'blocks to differentiation' (Bowen, 1961), and 'schism, skew and symbiosis' (Lidz, Cornelison, Fleck & Terry, 1957). Olson (1970) noted that concepts such as dysfunctional derived from work with families with schizophrenia, and therefore had less empirical validity. It is possible that these conceptual weaknesses in early systemic research were linked to the fact that the available concepts for research at the time

were those of 'functional' and 'dysfunctional'. Later systemic approaches reject the value of the notions of 'functional' and 'dysfunctional' concepts as adequate descriptors of relationships. It is relevant to note that contemporary systemic therapy is less oriented to producing descriptions of clients in objective terms and less concerned with a generalized conceptual framework.

Systemic couple therapy in relation to systemic family therapy

One aspect that might explain why the theoretical development of couple therapy might be less easy to grasp in terms of a unified body of theory, is that couple therapy began a separate course to that of the expanding field of family therapy (Nicholas and Schwartz 1998). viiiAn argument which supports the unrelatedness of family and marriage therapy was Haley's view that marriage counsellors were more influenced by other therapy traditions, e.g. psychodynamic theory, than by the emerging family therapy field (Haley, 1984) because there was no single school of systemic family therapy which had its origins in marriage counselling. This argument might support my impression of systemic couple therapy as of secondary importance compared with the broader family therapy field (Gurman & Fraenkel, 2002).ix

In Norway this relationship between couple therapy and family therapy is reflected in how the term "family therapy" is central in the training of family therapists, in the early Norwegian literature and in the professional title "family therapist". "Family therapy" is expected to cover all kinds of work done in a systemic perspective, and couple therapy is not visible as an independent field referring to a particular kind of formal therapy practice in Norway.

Contemporary systemic couple therapy

"Mental processes are matters of form rather than substance "(Bateson, xxv 1972).

I want to provide a background for the reader of the theoretical context of systemic couple therapy and developments, and thereby of my research context. This account is not explicitly about systemic couple therapy since I argue that systemic theory is more a perspective applicable to the different types of therapy than a full-scale therapy form. Systemic perspectives offer ideas of how to think about and approach therapy more than instructions about therapeutic content. I claim that a systemic perspective is less about what one should talk to clients about and more about how one should talk in therapy, and I explore it below as

a formalistic approach. It is relevant here to say something about systemic work within a Norwegian context. As the research process progressed, I realised that how systemic thinking has been received and developed in Norway is related to the Norwegian pioneers' way of talking about, researching and teaching the systemic perspective over the past 30 years, and this influences in turn how systemic couple therapy is practised in Norway.

Formalistic systemic theories

Therapy theories can be divided between those with a primary focus on form, and those focusing primarily on content. By a formalistic approach I mean an emphasis on procedures, rules or conventions for how to do therapy more than what one should talk about in therapy (it

can be claimed that psychoanalysis tried to be both).

Wittgenstein's (1953) language game metaphor is useful to demonstrate a formalistic approach. The game of Chess consists of pieces and rules. The rules determine how the different pieces can be moved and are comparable to a formalistic focus in therapy. A content focus on the other hand describes approaches that focus and emphasise the actual chess pieces

themselves. Transferred to therapy, this means a focus on, for instance, emotions or childhood narratives as central issues in couple therapy. I will explain, with a presentation of the systemic literature, that the systemic perspective is formalistic, with the implication that it provides fewer directions for content in couple therapy and thereby more space for cultural discourses about love.

First order formalistic systemic theory: the therapist as an expert

A first order cybernetic is informed by an epistemology that claims that external reality is 'knowable' in neutral terms, whereas the therapist occupies the role of expert and is in a position to instruct the client systems in changing processes (Pearce, 1992, Warhuus, 1998, et al). Within psychology, concepts from the field of cybernetics were found to be useful in describing communication within families (Bateson et al. 1956). Haley (1976) claims that every symptom has a function within a family or a couple, with the consequence that if one family member shows improvement, other family members "take over" the problem since the problem belongs to or is conditioned by the structure and the function of a family system.

Structure might be seen either as relationship rules or as rules for closeness and power.

Minuchin (1974) explains problems as caused by a disturbed hierarchy when a child is given too much parental power and role. Therapy is then directed toward changing the organisation of the family, as the changed structure may then allow each individual the possibility of improvement. A focus on rules, hierarchy and structure describes a formalistic approach in which the therapist is the expert on "how to play the game".

Second order formalistic systemic theory

A second order formalistic theory is informed by the idea that what is knowable in the external world is determined by our innate mental structures (Maturana &Varela, 1984) that implies that the therapist should include their own personal or theoretical bias as part of their observation (Hoffman, 1987, Warhuus et al., 1998).

Therapy as the construction of solutions

Solution-focused therapy (de Shazer, 1991) emphasises collaboration with clients in finding solutions, involving a focus on identifying rules for finding solutions more than on producing descriptions of clients' problems. As a postmodern therapy, the solution-focused mode1 of intervention is future oriented, rather than focusing on the past and the complexity of the problem. Solution-focused therapy occurs in a manner that respects the clients as the experts of their own life (de Shazer, 1993). The metaphor of skeleton keys (de Shazer, 1985 et al, 1988) is an example of how this approach is occupied with recognising the 'rules of the game' and is thus formalistic.

Therapy as construction of narratives

White and Epston (1990) claim that knowledge is organised into narratives with a particular kind of structure and Epston, White and Murray argue that "a story can be defined as a unit of meaning that provides a frame for lived experiences. It is through these stories that lived experience is interpreted. We enter stories, we are entered into stories by others, and we live our lives through these stories" (Epston, White & Murray, 1992:97). Life problems are expressed in terms of people trapped in their own narratives about themselves that do not offer space for more preferable stories, or in which there is little connection to important aspects of the person's contemporary experience (White & Epston, 1990: Boscolo & Bertrando, 1996). In both narrative and solution-focused approaches, form is prior to content:

in narrative, how events/episodes are described is more central than the actual content; it is however less formalistic than solution-focused therapy, which sees every utterance as a move in a game.

Anderson and Goolishian (1988) argue against "cybernetic systems theory" as described by Minuchin and Haley, which emphasises objective structures, in the form of roles, hierarchy and power distribution with control as the organising principle. Instead, Anderson and Goolishian understand language as the organising principle; "[I]n this different direction (or conversation) for the field of family therapy, human systems are seen as existing only in the domain of meaning or intersubjective linguistic reality" (Anderson and Goolishian 1988: 377). Language is the reality, not representations of ways of perceiving this reality, and "language does not mirror nature [...] language creates the nature we know (ibid: 378). Language is seen as the constitution of meaning, whereas communication in itself constructs the actual "definition" of the family, as the family is the family communications. An emphasis on language leads to the idea that it is not systems that create problems but conversations about problems that construct systems; problems become "a form of co-evolved meaning that exists in ongoing dialogical communication" (Anderson and Goolishian, 1988:70). Problems are not solved but dissolved in a dialogical atmosphere that organises a solution. "[t]he therapist is 'in there' as a learner, cooperating with, attempting to understand and working with the client's meaning system" (ibid: 384) and "the therapist is a master of conversational artist, an architect of dialogue whose expertise is creating and maintaining a dialogical conversation" (ibid: 384). In 1992, Anderson and Goolishian (1992) describe the not-knowing position as a position of "being informed by the client" (ibid: 29). Questions formulated from a position of "not knowing" are to be seen as tools the therapist uses to explore meaning and affect and facilitate verbal as well as nonverbal communication.

Critical reactions to the not-knowing position from the field were all occupied with how to understand this position in relation to therapeutic knowledge and expertise. Boscolo and Bertrando (1996) claimed that it was illusory to think that a therapist could act from a not knowing position, as it is impossible to completely avoid making hypotheses. Similarly, discarding the expert role is an illusion, since the context in which the therapist works

confirms supports and demonstrates an expert role (Boscolo and Bertrando, 1996). Rober (2005) claimed that the idea of not-knowing is a "disavowal of the therapist's expertise" (ibid: 480) leading to an "impoverishing therapy" (ibid: 481) which ignores the fact that "clients seek more than the liberation of their own subjugated knowledge" (Rober, 2005: ibid 481). Minuchin (1996) argued against the idea of not-knowing as a democratic position and

claimed that therapeutic power does not disappear with the development of an intervention intended to be "democratic"; power is still operating. Minuchin further criticized the collaborative stance for ignoring the individual family's history and social context, as families are also subject to realities of age, illness, economy and ethnicity (ibid).

In 2005, Anderson argued that not-knowing has been misinterpreted, since not-knowing is a concept among others such as the client-as-expert, conversational partnership, uncertainty, and therapy as ordinary life which represent the conceptualization of a philosophical stance reminding therapists to remember that they have no privileged access to the client's information and will always have more to learn about what the client says and does not say. This does not exclude that the therapist knows what s/he knows and is responsible for putting that knowledge into use in therapy. Anderson claims that letting the client be the "leader" or decide what is to be said and when is not to be understood as the therapist knowing nothing, but rather participating with opinions and questions (Anderson, 2005).

## Tom Andersen and Norway

One of the most influential Norwegian contributors within the systemic field, Tom Andersen, passed away in 2007. Andersen has influenced the Norwegian community in a quite personal and particular way. It is difficult to verify or prove his significance, but my impression is that he was present at every significant gathering of systemic therapy in both Norway and internationally, and he used each opportunity to make his particular mark on the Norwegian therapy community. He was both admired and criticized but whatever response he got, he continued to develop family therapy thinking. Andersen has influenced the couple therapy field particularly by his close association with the work of Anderson and Goolishian, and in recent years with Shotter (2007) and his ideas of joint action, chiasma and therapy as movement. Influenced by "his friends", Andersen developed a spiritual philosophy that encouraged systemic therapists in Norway to use sensations and intuitions and the practice of almost forgetting what therapists think therapy is about. In the Epilogue to his 1991 book, The

Reflecting Team: Dialogues and Dialogues about the Dialogues, Andersen notes that among the things he would have omitted if he had been writing now would have been the words 'explain' and 'explanation': "These words belong, as I see it today, to that part of the world where the physical sciences exist," he says (ibid: 157); " If I had written the book today, the words 'explain' and 'explanation' would have been replaced by 'understand' and

'understanding'," (ibid:158). I understand this position as a reaction to contributions to the field occupied with outcome research and evidence-based knowledge, and his message to the student was "forget the books and just look". This stance was also discussed and debated in the Norwegian field in relation to the question of expertise and what kind of professional knowledge is necessary for doing therapy. However, in the Norwegian community, Andersen had many disciples who followed their master wherever they thought he would be. I include Andersen's quiet revolt against scientific research here to validate the assumption that in Norway many couple therapists are less informed by therapy theories in their practice of couple therapy.

The wider couple therapy field

I want to specify and make distinct that the research question and thereby the research context

is Norwegian couple therapy as I experience it. The hypothesis about couple therapy being more informed by form than content relates to the Norwegian systemic context, and I am fully aware that European and American couple therapy literature is well underpinned by research and theory concerning couple therapy methods such as behavioral couple therapy (BCT) (Hahlweg and Markman, 1988), emotion-focused couple therapy (EF) (Johnson and Greenberg, 1995; Greenberg and Johnson, 1988, Johnson,1996), strategic couple therapy (Weakland, Fisch, Watzlawick and Bodin, 1974; Watzlawick, Weakland and Fisch, 1974; Fisch, Weakland and Segal, 1982; Weakland and Fisch, 1992) and insight-oriented couple therapy (IOCT) (Snyder and Wills, 1989) and later models of couple therapy grounded in attachment theory (e.g., Greenberg and Johnson, 1986, 1988; Johnson, 1996; Clulow (2001). So I am highlighting systemic therapy practices that have characterized the field in the Nordic countries and leave out relevant literature on couple therapy, which might be said to inform particularly USA and Western Europe.

## Summary

I claim that mainstream love research demonstrates some limitations in framing love as something that can be talked about independent of a social and cultural context. The history of marriage- and couple therapy, I argue, demonstrates that (initially) systemic couple therapy stands in a tradition of a-theoretical approaches at the same time as it has been influenced by psychoanalytic content. I have also accounted for the advent of the systemic perspective and how systemic couple therapy and the broader field of systemic family therapy have had a

parallel development, although within the systemic couple therapy field there have been fewer

common theoretical developments. Finally, the distinction between form and content has been

informative in leading to the question: if therapists focus particularly on form, on what are they drawing in any concrete session of couple therapy?

My aim in this literature review is to take the reader through literature that has influenced the production of this thesis, and to demonstrate how various sources at different stages have shaped my research focus. I have organized the review in two parts; in the first, literature that has been important for the analysis of my material is reviewed. Here I have imported literature from mostly outside the field of therapy theory to highlight the connection between the personal-psychological level of beliefs, values and theories and the broader level of cultural discourse, in order to demonstrate how these two levels interact, overlap and influence each other. Part two reflects mainly what represents for me a new acquisition of literature, namely poststructuralist theory. Reading poststructuralist writers provided me with significant insights into my own research agenda - an agenda that was hard to articulate at the start of the project. In addition, poststructural theory has helped shape the final research design.

Part I: A conceptual overview of theories of marriage and intimate relationships

While I focused in the Introductory Literature Review on mainstream research on love and its exclusion of a wider historical and cultural context, I adopt here a position mainly informed by Foucault who claims that knowledge must be seen as historically and culturally produced (Foucault, 1976/1981). I explore various historical concepts of love relevant for my analysis such as passionate and romantic love. Following this brief conceptual overview, I continue with a more in-depth look at the cultural models of love of Giddens (1991; 1992) and Beck& Beck-Gernsheim (1995) and I expand the review with feminist perspectives on romantic love provided by Evans (2003) and lastly the work of Wetherell (1995) which explores a discursive approach to the 'romantic' different from those of Giddens, Beck and Beck-

Gernsheim and Evans.

Premodern time – passionate love

I am destroyed, against her love I fold

My fire and ruckle all my torn despair

Until, surprised by thoughts formed from the air

I forge the unseen chains of bronze and gold

(From Ovid: Metamorphoses IV)x

Accounts of how love was perceived and practised in pre-modern Europe depend on which narrator one chooses. I have decided to present a conceptual historical development of love with special attention to literature about forms of love, desire and marriage constructed differently from the nuclear family model in which love, raising children and marriage presuppose one another. I found Giddens' conceptual accounts informative in contextualising an analysis of intimacy as transformed, which is my aim for reviewing a historical approach to love. In pre-modern Europe, according to Giddens, passionate love was a central source of the ideal of love and marriage, hence literary references were not to romance but to passion: "to an all-encompassing sexual attraction for another that was disruptive insofar as it led the individual astray from the mundane, generating a break with routine and duty" (Giddens 1992:38, 40). Passionate love was perceived as sexual attraction and was viewed as something one longed for, something most tangible in dreams, unpredictable and with almost supernatural connotations. Marriage in pre-modern times was mostly based on practical, economic and dynastic concerns, whereby passionate love was viewed as dangerous from the point of view of social order and duty as it held no function as a necessary or sufficient basis for marriage (Giddens, 1992).

The historical notion of passionate love as depicted above can also be seen in contemporary

love talk; our ready reference to people as being 'lovesick' mirrors the subject's feeling of disruption, divergence from the norm, of being out of control and positions the person in love as almost a victim of love. The description of passionate love is not too different from contemporary love-talk but one important difference is that courtly or passionate love was not expected to result in marriage or a long-lasting relationship. I argue that people in contemporary societies are as concerned with passionate love as were our pre-modern predecessors, but must choose between passion and a lifelong commitment when the people involved - the loved and the in-love - are already in some way committed to another

relationship defined as long-lasting and monogamous.xi Such dilemmas and torments are an issue commonly brought to the therapy room today.

Late eighteenth and nineteenth century: love as romance

Some day my prince will come

Some day we'll meet again

And away to his castle we'll go

To be happy forever I know xii

The term "romantic" is used in narratives often accompanied by a sigh, as in "Oh, so romantic!" with the underlying association to affectionate emotion. However, it is important to distinguish between an ordinary and unreflective use of the word 'romantic' and use of the term more relevant to this thesis: its application to 'romantic' love as a historical frame of reference. In this thesis, 'romantic love' refers to narratives about finding the right one to live with, and the drive to institutionalise these narratives into a long-term relationship/marriage (Willig, 2001). Romantic love has historically been traced back to the emergence of modernity and the middle class, namely to the 17th and 18th centuries (Giddens, 1992, Coontz,

2005). The project of romantic love was to combine passionate attraction and sexuality within the framework of marriage, a marked divergence from the passionate love of pre-modern times that was by definition in conflict with marriage, which in turn was itself an institution with mainly socio-economic functions (Evans, 2003; Coontz, 2005; Thagaard, 2005).

Interesting for my thesis is the question of from which perspectives one can understand the

emergence of love as romance. According to Giddens (1992) the first backdrop to romantic love can be found in the portrayal of girls in nineteenth century novels as validating their identity through the quest for their future husband and their ultimate self-realisation as women

(ibid). Insofar as they saw their lives as based on this endeavour, they could project themselves forward in time, to the moment when love finally arrived and was expressed in a life-long marriage coupled with parenthood (ibid). One can argue against Giddens that this claim that single women experienced themselves as incomplete individuals waiting for marriage is a gendered premise, as men and women are socialised to think that marriage makes women complete. Women strived for marriage also because it was a requirement for economic and material-structural reasons. It is an interesting question whether such an experience of being incomplete as a single person is still the case today, as marriage /couple-

hood is the dominant discourse for intimacy, and success with intimacy issues is important for self esteem and social status. Another backdrop against which romantic love can be seen is that of rationalising processes, since marriage viewed through the lens of romantic love was a "potential avenue for controlling the future, as well as a form of psychological security in principle for those whose lives were touched by it" (ibid: 41). I consider that the attractive ideas of enduring as mates and of the couple as a secure base, shed light on the societal function and agenda of couple therapy as a support to help couples remain couples, which again suggests a reason for why couple therapy in Norway continues to receive economic support from political sources. However, this expectation of marriage as a buffer against threat places much weight on a small and vulnerable unit, and therefore much responsibility for the delivery of material safety and existential meaning.

Giddens argues that romantic love is a step for the individual on the way to freedom but one might ask if Giddens' analysis is too superficial here. Real freedom and self-realisation are potentially limited in relation to the actual premises on which traditional marriage is based, namely the acceptance of gender differences, roles, and monogamy. Thus, although romantic love in Giddens' account is explored as a step towards an individual's self-realisation, one must take into account that the prevailing living pattern in the 18th century was not the family in the modern sense but rather a large household containing an extended family that formed an economic unit (Beck &Beck-Gernsheim, 1995).

The advent of the nuclear family

Eight eyes that gaze at one another.

Four mouths around a table.

Four walls encircle a joy:

Princess, Junior, mother, father
Eight hands joined together
in a ring against all danger.
O Lord, if only all the wide world
could be as fortunate.
(Lykke by Einar Skjæraasen, translated by K. Schou)
The nuclear family was the initial object inspiring the birth of family- and couple therapy and its ideals have influenced therapy and vice versa. The nuclear family model was the only way

of being a family I knew of when growing up. All my friends had a mum and dad and some had siblings while others had not. Our everyday nuclear family life was full of rituals and codes demonstrating who belonged to whom in which ways. The door sign was a homemade ceramic one showing a nest with two birds feeding tiny, screaming bird-mouths. Another example of the nest ideal was how holidays meals were celebrated, such as Christmas Day, where there were to be absolutely no calls or contact with the outer world (friends), demonstrating the family's privilege of being alone together for a whole long day. As I was raised with the ideal of the nuclear family as the best and only way to belong, I find it interesting to incorporate the above observations to demonstrate that the nuclear family is not an a-priori entity independent of time and space, but rather a fixed construction, with clear expectations and norms that govern how intimacy, gender roles and parenthood are to be lived. When members of a nuclear family experience a break with the nest ideal of how to live

expectations and norms that govern how intimacy, gender roles and parenthood are to be lived. When members of a nuclear family experience a break with the nest ideal of how to live and be in a family, they may start to verbalise experiences of uneasiness, and sometimes this uneasiness materialises as family therapy issues.

According to Shorter (1975/1979) the nuclear family defines itself by an attitude of solidarity, as a shelter from the dangerous and threatening world 'out there'. It is this idea of family as a shelter that is at stake when the nuclear family is challenged by internal or external threat. An account of the nuclear family as a state of consciousness rather than just a domestic arrangement (ibid: 224) is more useful than defining the family by its structure seen from a therapy perspective. In the former, the norms, expectations, and functions involved in ideas about what a family should be are emphasised, rather than mere description of who is living together in practical terms. This emphasis on exploring the mental map of a family is recognisable within a systemic approach to family (Bateson, 1972, 1979, Selvini, Cecchin, Prata, Boscolo 1978) xiii

Beck and Beck-Gernsheim (1995) explain the ideals of emotional bonds within a family as a process that counteracts and compensates for the gradual loss of other guidelines and social

certainties as society moves towards its current form. The idea that marriage and family should compensate for other traditional ties resonates with the romantic idea of family as a protecting nest, a buffer against everything from trivial day-to-day matters to great events in world politics (ibid). I argue that in the account of the nuclear family as a nest, one must also take into account evidence that the family has been and is an arena for violence, threats,

isolation and domination. Family has been for many a double-edged phenomenon, promising safety and belonging on the one hand and delivering experiences of insecurity and violence on the other. It is the expectation of trust combined with experiences of betrayal that has made this private arrangement of family the subject of criticisms such as those raised by novelists and researchers in Norway (Faldbakken, 2001, Mühlausen, 2003, 2007).

Democratisation theories of love – contemporary love ideals

I loved you for your beauty

But that doesn't make a fool of me

You were in it for your beauty too

I loved you for your body

There's a voice that sounds like God to me

Declaring that your body's really you

I loved you when our love was blessed

And I love you now there's nothing left

But sorrow and a sense of overtime

And I miss you since the place got wrecked

By the winds of change and the weeds of sex

Looks like freedom but it feels like death

It's something in between, I guess

It's closing time

Cohen, From Closing time,xiv

There have been various attempts to conceptualise late twentieth-century processes of social

change and transformations of love and intimacy. Altered practices and divorce statistics suggest personal struggle with the ideal of landing for good in the nuclear model of intimacy and building a family. Giddens (1991, 1992) accounts for changes in love with terms such as 'transformation of intimacy' and 'reflexivity' while Beck & Beck–Gernsheim (1995) use terms such as the 'new era' and 'the normal chaos of love' among others. These sociological contributions are commonly referred to as 'the democratisation theories of love' (Evans, 2003), a concept intended to cover contemporary trends in which intimacy, intimate relations and love are said to be characterised by freedom, equality and reflexivity, involving freedom of choice to a greater extent than traditional bonds with their attendant structures, duties and traditions. The latter is also referred to as the individualisation thesis, emphasising the individual's powers of choice and negotiation in matters of intimacy. I will explore and critique some of the key concepts in the 'democratisation theories of love' as theories of intimacy are relevant for the practice of systemic couple therapy in that they may suggest explanations for how people deal with the various contemporary discourses of intimacy.

Giddens and 'the pure relationship'

While romantic love as an ideal has had a huge impact on how intimacy is organised in late modernity, it has at the same time been challenged by what Giddens has called the 'pure relationship':

[The] "pure relationship [...] refers to a situation where a social relation is entered into for its own

sake, for what can be derived by each person from a sustained association with another; and which is

continued only in so far as it is thought by both parties to deliver enough satisfaction for each individual to stay within it" (Giddens 1992: 58).

The ideal of a pure relationship tends away from the traditional model of marriage toward a post-traditional form in which the relationship is seen as a means to self-development; the expectation is rather that, if and when the relationship no longer serves the purpose of selfrealisation,

the relationship can be terminated. This, then, places the relationship in a reflexive loop with questions such as: 'Is everything well in our relationship?' and 'How is this relationship contributing to my self-development?' It is this very restructuring of intimacy in terms of people having choice in relation to their relationships that Giddens terms the pure relationship. The upside of these relationships is that they offer human freedom and happiness, but at the same time they are by nature unpredictable and can cause great anxiety. Interesting for the field of systemic couple therapy is the observation that these pure relationships become increasingly dependent on expert systems as therapeutic practices keep pace with the development of the project of self-reflexivity.

Whereas previously marriage therapy aimed above all else to save the marriage, now it is such that the almost daily assessment of the status of the relationship and its dynamic forces the therapeutic drive to lie in facilitating relationships in which emotional communication and

reflexive questions play a central role. xv Another key concept in Giddens' analysis of love in late modernity is 'confluent love', which he defines as a model which breaches the for-ever premise in the constitution of the marriage pact, and introduces premises such as equality in, for instance, emotional exchanges (Giddens 1992).

Discussion of Giddens' concepts

Giddens' important contribution is his account of how sexuality and love might be connected to reflexivity and the drive for self-identity in late modernity.xvi Giddens is helpful in illustrating a cultural situation by defining a double-edged phenomenon of freedom and psychological self-development and the experience of psychological risk. I also argue that Giddens' concepts of pure relationship and confluent love portray and anticipate ideas about

intimacy relatively distinct from those most active couple therapists were brought up with. This shift from an emphasis on traditional marriage towards a focus on psychological work and reflexivity as the glue in relationships indicates why couple therapy had to adjust its theoretical foundation to changing ideas and ideals.

Jamieson (1999) raises a critique of Giddens in her point that (i) "much of personal life remains structured by inequalities" and (ii) "that the rhetoric of pure relationship feeds on and into a therapeutic discourse that individualises personal problems and down-grades sociological explanations" (Jamieson, 1999: 477). With this argument, Jamieson claims that Giddens in his proposal of pure relationship creates failure because he does not consider the gap between an idealistic description of life and how one should live, and how people really experience their lives. Another failure is that, by individualising problems, psychologists and experts can speak of freedom of choice, reflexivity, and equality while ignoring structural inequalities such as gender differences and power imbalances (Jamieson, 1999). As she points out, women have become 'clientified' by couple-experts over time as dependent and as people who fail to be satisfied relation to the modern demands of self-development and reflexivity. Many women remain in bad relationships because of structural conditions; many women do not have equal access with their male partners to the work market with equal potential to earn money and take proper care of themselves and children if they leave their relationships.

In Norway for instance, many couples and families live in rural areas, dependent on social support from kin and families. I have heard in my experience doing couple therapy, for instance in northern Norway, that it is often not viable to simply leave an intimate relationship and start all over again. So when women do not leave abusive and violent relationships, it is not necessarily because they are less self-reflexive, or in poor psychological shape without the "guts" to make a change, but because of structural conditions. The alternative to a "bad" relationship for some women is to be left alone, since the couple and nuclear family is the most represented and acceptable model for intimacy. Writers such as Ribbens McCarthy,

Edwards and Gillies (2003) are also highly critical of the emphasis on individual happiness, "creative and plural lifestyle possibilities" and contingent and chosen relationships of Beck and Beck-Gernsheim, and Giddens (Roseneil 2007). They draw attention to the lack of availability of such practices to women in particular who are embedded in day-to-day

practices of familial care for others, such as compromising, cooperating, providing nurturing to others, and these practices are often devalued, presumably because they reflect a female experience ( Hare-Mustin & Maracek, 1988)

Beck and Beck-Gernsheim: The normal chaos of love and the "New Era"

Beck and Beck-Gernsheim (1995) explore the dilemmas and challenges concerning love that arose in late modernity as a consequence of individualisation and secularisationxvii. The relevance for my research focus lies in their analysis that conceptualises both changing intimacy issues and why couple therapy might play a role as an advice-giving institution today. Beck and Beck-Gernsheim explore the gap between Old Era and New Era, where New Era refers to "a collision of interests between love, family and personal freedom" (ibid: 1). Characteristic of the Old Era was that definitions of roles and functions were clearer; men and women of middle-class upbringing anywhere in the Western world desired to marry, and to bear and rear children. The New Era refers to a condition in which almost everything is a matter of choice: relationships, jobs, and marriage, with the possible consequence of a conflict of interests between couple-relationships, family/children and personal freedom.

The authors claim 'it is no longer possible to pronounce in some binding way what family, marriage, parenthood, sexuality or love mean, what they should or could be; rather these vary in substance, exceptions, norms and morality from individual to individual and from relationship to relationship' (ibid: 5) It is in this collision of ideals about how to live family and intimacy that couple therapy also becomes squeezed between old and new ideals and practices. The significance of couple therapy as an actual profession lies in the fact that, common to both the old and new eras, it is important to display a good "self-biography" and this involves showing off one's relational status; the picture of what is a good relational status to show off is changing in the new era.

'Beneath the nothingness - between the cracks across the emptiness one can glimpse a new kind of

small-scale paradise quite unconnected with other realms and their rules which gave life its meaning, a

little utopia which does not depend on tradition and therefore cannot be codified or institutionalised

and need not to justify itself, it is simply tailored to fit individual needs' (Beck and Beck-Gernsheim

1995:169).

Beck and Beck-Gernsheim (ibid) emphasise above the process of secularisationxviii as important in understanding the chaos of love. The fascinating aspect of these authors' analysis is that while they initially identify the secularisation process as the reason we struggle with contemporary intimacy, they at the same time return to a religious vocabulary to emphasise the importance of love, but in terms of a distinction between a profane addiction to love and the god of privacy, and love as a secular religion. I think the conceptualisation of love as a religion explains a contemporary paradox seen from a couple therapy perspective; namely that although marriage has lost its stability, it still has attractiveness as a means of finding oneself. As a process of increased life experience in finding an emotional involvement, love is highly central (ibid). As new ideals emerge as a consequence of the break with tradition, one result according to Beck and Beck-Gernsheim and Giddens is that love becomes democratised, which includes both sexes beginning to long for and expect new ways of friendly coexistence as the norm. This claim of democracy in love is a debatable and idealistic argument, as I discuss below.

## Therapeutic issues

One of the implications of the normal chaos of love, is that "breaking up and dissolving the marriage seems less of a threat than giving up oneself and one's own interests" (Wachinger, 1986: 80-3 quoted in Beck and Beck-Gernsheim, 1995). This is a strong statement, pointing at the implications of how changed the ideals of intimacy are and Beck and Beck-Gernsheim indicate that this change must be reflected in therapy. Therapy has to include the social structures which frame our lives such as working and living conditions, family ideals, gender role stereotypes and values within which personal needs and wishes are organized and oriented (ibid: 182). Beck and Beck-Gernsheim suggest concrete challenges for couple therapy such as midlife crisis, breach of expectations, high expectations and gender and power struggles among others, but these themes do not actually represent anything new for the practice field of systemic couple therapy. One aid in extending terminology is the list of alternatives that has emerged after the decline of the nuclear family, for instance the

alternating family, the negotiated family and our past and present families (ibid). These new family labels represent more than new names for the traditional family. They represent breaks in thinking about sexuality, normality, laws and the matter of children. Incorporation of the newly created discourses is a task that demands rethinking the grand narratives of, for

instance, romantic love. From the stance of couple therapy, it will be interesting to explore what societal function couple therapy should have in this gap between Old and New Era. This stance has consequences for professional training and types of profession, just as did the earlier idea of family and marriage treatment with its associations to psychology and psychiatry; the New Era perhaps claims new kinds of insight and theories such as discursive knowledge (see below and the final Discussion chapter).

Discussion of Beck & Beck-Gernsheim and the democratising theory of love

The concepts delivered in Beck and Beck-Gernsheim's analysis have been useful in emphasizing that the reasons people seek couple therapy have to be seen in connection with cultural and social expectations, as these influence the individual's perceptions in evaluating their own relationships.xix But, how sound is the analysis, and how relevant in the end are these insights for therapy practice? One reservation I have is that Beck & Beck-Gernsheim mystify romantic love, declaring it as the 'new religion' and continue to personalize love issues. Evans in "An unromantic discussion" (2003) raises a critical view of 'romantic love' and builds her analysis upon the idea that the whole concept of romance is a failure as a premise for marriage. However, she does not critique marriage as a normative institution in itself and therefore her critique takes a different tack than that of Jamieson and Roseneil (see above). I briefly explore her arguments below since her ideas expressing doubt about the romantic love project are also part of the contemporary discussion of love and intimacy issues which informs therapists.

The concept of individualism

Evans (2003) claims that the concept of individualism along with the ideal of romantic love is at the root of the difficulties of love since individualism places the individual at the centre of a framework of beliefs and values linked to well being. There has been passionate love all

through history but the expectation that romantic love should be an essential part in the construction and continuation of marriage is a new one and worthy of discussion and exploration (ibid: 8). Evans employs the ideas of philosophers such as Arendt when arguing that love has been too personalised and sexualised, and with the consequence of a negative effect on larger communities and public institutions. Where Giddens depicts the pure relationship as a model for intimacy in late modernity, Evans attacks this ideal, and regards

such a model as a result of 'alienation', causing us to turn to love and partnership for fulfilment. Evans takes further the argument of Beck & Beck-Gernsheim about individual expectations as a reason why the traditional model of marriage is challenged since we demand more of love, yet are unable to meet these demands ourselves (ibid). Evans' position is that it is socially disturbing that the disappearance of love means the end of marriage (ibid: 101). In Evans' argument, I see a possible and partly recognisable repertoire for couple therapists: if someone claims love has gone, an answer could be that romance is not essential to marriage since at the beginning of the twenty-first century neither men nor women have to associate love with marriage. The discussion of how important romance is to marriage is a therapeutic discussion, since this question is frequently asked in couple therapy.

## A class perspective

From a class analysis perspective, one can argue with Skeggs (2003) in her critique of Beck and Beck-Gernsheim that the "recent emphasis on self-agency" (Skeggs 2003:76) normatively promotes individualism and individuality "as not only compulsory, but inevitable and universal" (ibid: 61). Skeggs argues that choosing is a middle class way of operating in the world, and that the reflexive self is "a very specific class formation", as "the resources and techniques necessary to self-formation and self-telling are not equally available" and in that ignore ongoing class inequalities (Skeggs, 2003:134, Roseneil, 2007).

### Gender critique

Evans (2003) critiques the "democratising of intimacy" account for being "an optimistic male rationalisation of a new order of Western gender relations made possible by the economic emancipation of women" (ibid: 4). According to Evans, it is too positive an account because one then assumes that changes in the private world will bring about corresponding changes in the public, and this is to ignore the strength of those institutions and structures that are far

from democratic (ibid). According to Evans, narratives such as soap operas and other massproduced

romantic love narratives have in common the message that sex does not need love, but marriage does; in these scenarios, marriage is highly romanticised. Evans claims that such ideas are an exploitation of the female psyche because romanticising marriage this way has a negative effect on women and on the societal view of women (ibid). This view holds that women are socialised to enter into scripts in which the man is strong and seductive, the one

who takes the initiative, while the woman remains passive and restrained. Another more concrete consequence possible here of such TV series is that the woman's life remains less exciting if she is not in a relationship with a man who adores her and wants her. At first glance, Evans here "steps on a sore toe" since as a culture, we like to take the positive position of Giddens that women and men are much more alike. However, that makes Evans' critique even more important, I argue, since looking more closely at the premises of media representations, one finds gendered discourses that have depicted/represented/constructed women as more dependent on men for intimacy, sexuality and love, although on a more subtle level.

Commercialised love – the sale of romance

According to Evans, we live in a world where advertisers offer sexual images to satisfy what are essentially emotional needs. Evans raises an important ethical issue also for couple therapy in pointing out how the combination of capitalism and a romantic discourse produces the shadow of commercial exploitation. Commercialised love, according to Evans, offers a climate that is "often painful and confusing since individuals can construct relationships through the exchange of commercially constructed signs and then discover a paucity of mutual affection" (ibid: 78). Whether one completely agrees with Evans or not, it is clear that these forces of commercialism influence people in living out their intimacy and that this is an issue for therapists revealed in questions about love such as, 'can love be bought?' How far should therapists advise their clients in questions about attraction raised by many couples in terms of "I don't find my partner attractive anymore"? The question is, should the couple therapist work on that issue, as well as on communication problems? Couple therapists do pedagogical work, for example on learning to be a more attractive listener, but should they also and do they in practice participate in making the individuals more physically attractive? Since in our culture we are overwhelmed by the discourses of market forces, commerciality and ideals for how to be a happy and successful person, it is reasonable to think that such discourses also are discourses on which the couple draws. I raise these questions as therapy in particular seems to mirror what clients bring in (Hare-Mustin, 1994) and therapists are placed in an expert role regarding questions of "what is love", and how best to improve one's relationship. In terms of the sale of romance, the questions are which price, and how far

would or should one as a citizen support the sale of romance in all its variants? Is there a limit, and who should participate in the question of where the borders should be drawn?

Discussion of Evans' Analysis

Evans' diagnosis of Western culture is that it lacks moral and cultural substance, an utterance I find pessimistic and somewhat moralistic. Evans is engaging philosophers from the Enlightenment and classic novelists such as Jane Austen to illumine the path of our culture away from unstable sensitivity to trustworthy sense. The love ideal of Austen is recognisable as a discourse framed in terms of love as a virtue one has to refine; love means to mature together in the shelter of sense, and as a stance in opposition to erotic passion and the dangers of falling in love. An implicit message in Evans' analysis is the claim that "it was better before than now", and Evans is therefore important in demonstrating how when facing cultural change and new forms of intimacy, an often applied countermovement is to respond with a conservative and anxious voice. This countermovement is also a reflex for which many individuals seek assistance. Systemic couple therapists operate in this changing landscape of intimacy, and it is relevant to question how the position that things were better before influences the concrete practice of therapy. Evans could further be criticised for overlooking groups of people who do not fit her analysis and who may be in positions where they cannot make choices. Evans' statement that women have economic independence and other forms of capital (social and cultural) that lessen the need for male protection ignores significant differences in the history and contemporary experience of many different groups of women (Skeggs, 2003). However, although Evans is conservative in her claims critiquing processes of individualisation, it is worth rethinking the tendency in Western culture to privilege private life and personal experience over other kinds of fulfilment, and to reflect

more on the ability to consider moral, relational and ethical dilemmas of our time. What

Evans misses is an analysis of contemporary practices beyond the frame of marriage and the

hetero-couple- as for instance outlines how to live love beyond heteronorm (Roseneil, 2007).

Margaret Wetherell: Romantic Discourse and Feminism

Couples often seek therapy because their romance has become unhappy instead of 'happy ever after'. One might smile reading such fairy-tale expressions, but romantic love premised as a promise with a happy ending, protection from problems such as jealousy, material worries and sickness is reflected in the couple therapy room, when romantic expectations fail.

In her article "Romantic Discourse and Feminism", Wetherell (1995) approaches a discursive psychology of romance and gender. She outlines a traditional, humanist psychological interpretation of romantic love that frames love as a primarily emotional experience; an experience outside time, culture, and history that has its own authority. Wetherell, by using a discursive approach, rejects the model in which love is talked about as something that exists and as a true and fixed item within a person, represented in everyday expressions such as "I don't feel love anymore" or therapeutically framed as "you have to really find out whether you love her or not". The limitation with such a vocabulary is that love is seen as something personalised and internalised with no reference to how a range of love talk plays a central role in shaping, constructing and constituting the identification and thereby our reported experiences of love. Wetherell makes the connection between cultures, subjects and discourses as distinct from the individual merely referring to experience.xx

A difference between the approaches to romantic love of Evans and Wetherell is that where Evans critiques romantic love as illusory and irrational, Wetherell identifies instead important qualities of romance; how romance positions us in particular ways (ibid). According to Wetherell, romance is "a text which presents an image of redemption, of salvation and rescue" (Wetherell, 1995: 132). Romance seems to exclude emotional ambivalence; the optimal ending in a romantic narrative is unity, reciprocity and certainty. Wetherell claims that the romantic narrative functions often as the meta-story whose "happily ever after" conclusion prohibits further narrative development like those in fairytales such as Cinderella where there is no continuation of the narrative after the heroine gets her Prince. Therapy approaches vary from the more traditional approaches exploring the "substance" in client's love-narratives, to those with a less traditional tack, like looking at how romantic narratives embody premises about happy endings that make it difficult to stay in a romantic discourse when narrative friction emerges.

#### Summary

In part one I reviewed literature moving mostly outside the frame of couple therapy theories and research. I have imported theories and analysis of marriage and love from a sociological stance, looking at the history of intimate relations from pre-modern Europe to the early 21st century. I divided this account of intimacy history into two parts; in part I, I discussed theories that draw upon and criticize the democratisation theories of love of Giddens, Beck

and Beck-Gernsheim, and the feminist critique represented by Evans and a discursive, feminist approach by Willig.

Part II: Poststructuralist theories of sexuality and intimacy

In this final part I want to orient the reader to the poststructuralist literature that has influenced my choice of methods and my analysis. The poststructuralist perspective, which emphasises power and deconstruction of "taken for granted" knowledge, has contributed a conceptual vocabulary that has made it possible for me to articulate the preconceptions I had prior to starting my academic research. An example of such a preconception is that systemic couple therapy can be understood as an occupation that promotes normative knowledge, among which are hetero-normative ideas about how love is to be lived. Poststructuralist theory such as the work of Foucault has helped me to formulate a critical perspective on couple therapy and romantic love, while feminist writers such as Hollway, Butler and Roseneil influenced my critical reading of the literature presented in part I. I include poststructural

theory also in the Methodology Chapter I refer to literature with particular relevance for the analysis, such as theories of sexuality and gender.

Foucault and the archaeology of sexuality

Foucault's account of sexuality has been significant for two reasons. One is that Foucault shows concretely that theories about sexuality are made and eventually obtain truth status because we do not know their archaeology and forget the constructed aspect of sexuality. Another reason is that Foucault's understanding of sexuality provides an example of how power and knowledge are tightly bound up with each other and how regimes are developed to control and correct persons in particular ways. In the case of sexuality, the control is exercised through experts such as doctors, teachers and therapists, who in different ways give meaning to how sexuality is to be understood. This again influences the view of what is normal and

what falls outside the scope of the normal and becomes seen as perverse. Relevant to this study is the claim that therapists have considerable power and legitimacy to influence people in questions about normality and aberration.

Repression hypothesis

In the History of Sexuality, Foucault (1976/1981) argues against the repression hypothesis, viewing as a common but mistaken thesis the idea that sexuality is repressed in Western

cultures and is thereby subject to laws, censure and denial. Foucault is critical of the historical truth of this hypothesis:

"The question I like to pose is not, Why are we repressed? but rather, Why do we say, with so much

passion and so much resentment against our most recent past, against our present, and against

ourselves, that we are repressed?" (Ibid: 8-9).

Captured in this critique of the repression hypothesis is also a critique of a juridical-discursive view of power.xxi Foucault claims that power is primary in upholding sexuality as repressed through censure, laws and taboos. An example of this is how sexuality was guarded via campaigns against masturbation, where the aim was to control and correct this dangerous phenomenon (ibid). So much attention was given to the repression hypothesis, that one might suspect that the objective was not the elimination of masturbation; rather, the point was to organize the individual's development, both bodily and mental (Giddens 1992). Sexuality as we come to know it in contemporary times is, according to Foucault's analysis, produced through detailed knowledge and power strategies (Foucault, 1988).

"Abnormal sexuality"

Therapy is a curative practice but is also according to Foucault in the tradition of disciplines with regulatory and pedagogic aims. Psychiatrists, doctors and teachers have catalogued and described sexual behaviour such as masturbation, same-sex activity and women's desire as perversions, and in doing so these professions have had a role in constructing sexuality as an issue for therapy. The effect was not to suppress perversions, but to give them an analytical, visible, and permanent reality as they were "implanted in bodies, slipped in beneath modes of conduct "(ibid). From a couple therapy point of view, it is interesting to question why these different groups of professionals engaged in these practices of categorising what have

historically been labelled perversions, and I think we have to understand the close connection between therapy and knowledge regimes here. Questions about sexuality, then, have been useful in disciplining and influencing the individual through therapy and telling people about normal and abnormal behaviour and thinking. Foucault's analysis is useful in reminding me of how invisible power finds ways into the couple therapy room as therapeutic power is shaped by macro processes, including cultural discursive forces (Hare-Mustin, 1994; White & Epston, 1990) Because of the dominant discourses of sexuality and confession, the therapy room is especially suited for taking control over the individual through construction of

categories of right and wrong, normal and abnormal, mainstream and marginal, and this is important to bear in mind in reading this thesis.

Foucault's theory of sexuality as a frontrunner to contemporary couple therapy

I include Foucault since he to me narrates the impetus for couple therapy xxii or rather he provides one explanation of why couples bring issues such as intimacy and sexuality to a public space as in therapy. Foucault (1976/1981) frames sexuality as a discursive construction that has become one of the principles by which public life is ordered. While many regard sexuality as private, according to Foucault sexuality is public in our culture. One example of how sexuality becomes public and also an issue relevant to therapy is, seen in how we are publicly exposed to permeating and leaking discourses claiming how important sexuality is and accompanied by detailed descriptions of 'how it should be'. People adjust to these exposed expectations, and strive to do it and feel it 'right' but some also experience uneasiness and guilt because of 'not getting it right'; therefore it is not unusual to seek help for sexual worries in therapy.

Critique of Foucault's theory of sexuality

"It is difficult, if not impossible, to make sense of these issues if we stay within the overall theoretical

position that Foucault developed, in which the only moving forces are power, discourse and the body.

Power moves in mysterious ways in Foucault's writings, and history, as the actively made achievement of human subjects, scarcely exists." (Giddens, 1992: 23-24).

Following Giddens' critique, one could claim that Foucault has a limited orientation towards sexuality and does not give an account of sentiments, emotions, habits and narratives of

romantic love. I include this critique of Foucault to show that his analyses of sexuality are too narrow to support a therapeutic practice, although this critique may be irrelevant, as Foucault had another focus and aim for his analysis. He was not concerned with the fine-grained individual level of phenomena and psychological experience; his intention was to demonstrate as a philosopher that the grand narratives and major discourses put weight on the individual left to navigate and adjust to these dominant narratives about how life should be, and that this might be marginalizing and excluding for those who for many reasons are shut off from the grand narratives. Foucault gives methodological access to the deconstruction of knowledge shown brilliantly in his historical study of sexuality, but therapy must necessarily do more than merely point out the workings of power. It must also help in the processing of traumas,

betrayals and disappointments. Power and knowledge are sources of traumas, betrayals and disappointments but the latter must also be faced and coped with and therapists are often sought out to help with these experiences. Another focus is needed in addition to Foucault, one that moves closer to the subject as a psychological subject, with intentions, emotions and choices, dealing with dilemmas and paradoxes, searching for meaning in the discursive landscape of the grand narratives.

Hollway - gendered subject positions

Hollway (1984, 1989) has provided a comprehensive and influential analysis of talk about relationships and heterosexuality from the perspective of psychological research. In her analysis of men's and women's talk about sex, Hollway identifies three discourses that provide gender-differentiated subject positions: the "male sex drive discourse", the "have/hold discourse" and the "permissive discourse". These differ from the Foucauldian analysis of sexuality on an abstract level in the emphasis on understanding how several coexisting and potentially contradictory discourses of sexuality make available different positions for men and women to take up (Hollway, 1984). Although Hollway makes a rich analysis of gendered sexuality, I argue that in her strong focus on gender differences, she strengthens these differences in the sense that one gives power to what one identifies. And as these discourses are gendered they are also quite hetero-normative in their descriptions.

Hetero-normative or hetero-centrisme are concepts which both refers to assumptions and processes embedded in mainstream society and its institutions that imply that human beings are naturally heterosexual, and that heterosexual lifestyles are the normal standard against which those of sexual minority people should be compared in order to be understood and evaluated (Herek,1998). Hollway ties her analysis to a description of the differences between men and women and the interplay between the female and the male as if this focus is selfexplanatory.

With this critique of Hollway in mind, I think her analysis is fruitful for

understand the various discourses at play – culturally, as the key words and dynamics described are helpful in understanding how discourses offer gendered positions, and how these subject positions represent struggles and conflicts within the couple.

This discourse proposes that men are driven by biological necessity to seek out heterosexual sex. It is premised on the view that sex is a natural need and is not mediated socially. This discourse positions men as chasers of women or as in a position to observe and objectify women, for example to critically evaluate women's bodies. In this discourse, women's sexuality is sometimes seen as governed more by the need to reproduce than by the need for sex (ibid). This in turn regulates what can be said and done sexually between men and women, and makes possible men's exercise of sexual dominance over women, forcing women to take up the position of having to have sex against their will, for example. Women are not allowed to have their own sexuality independent of the male's expressed needs and the aim of reproduction.

From the view of couple therapy, this male sex-drive discourse is interesting to follow historically, as it is an example of a discourse that has changed from the 1950s to the present. If a couple therapist was to say to a woman, "well, you just have to do it, for your husband's sake, to save your marriage", the therapist would be most probably seen as a conservative non-feminist throwback. At the same time, implicit drawings on this discourse are found in the commercializing of love and sex (see Evans, 2003).

#### The Have/Hold Discourse

This discourse is not centrally concerned with sex, but is closely linked with ideas of monogamy, partnership and family life. According to this discourse, sex has a taken for granted place within the context of a lasting relationship, such as marriage. Principles of monogamy and family life are embedded in the vows of the Anglican Church, hence the term "have/hold", where marriage is seen as a pact between the couple and God. In principle this discourse applies to both men and women in the sense of conferring different positions for men and women in society, but in practice it applies more stringently to womenxxiii. This

have/hold discourse is also recognisable in the practice of couple therapy and the deployment of such a discourse has the discursive function of appealing to a couple to work for the endurance of the relationship.

#### The Permissive Discourse

In this discourse the principle of monogamy is challenged and it is considered the right of both men and women to express their sexuality in any way they choose. In assuming that sexuality is natural and should not be repressed, the permissive discourse is allied with the male sex drive discourse that views sex as a natural drive, but it differs from this discourse in that it applies the same assumptions to both men and women (ibid). Despite this, the permissive discourse has limitations for the position of women, as Campbell (1980: 1-2) indicates:

The permissive era permitted sex for women too. What it did not do was defend women against the

differential aspects of permissiveness of men and women.... It was about the affirmation of young

men's sexuality and promiscuity; it was indiscriminate and its object was indeterminate (so long as

she was a woman). The very affirmation of sexuality was a celebration of masculine sexuality.

It is interesting to question how this permissive discourse influences couple therapy. As the two other discourses emphasise the male drive and to have/hold, both of which retain a grasp on the traditional model of marriage and the male's sexual privileges in marriage, the permissive discourse should position men and women in relationship differently, and might be said to have the function of encouraging the partner to reflect over the relationship in terms of for instance "Am I getting what I need?" or "Do I have the right to do what I want?" as the argument in favour of the individual's rights (I), becomes more central and prior to the partnership "We."

Butler - Gender as a fictive construct

We do things with language, produce effects with language, and we do things to language, but

language is also the thing that we do. Language is a name for our doing: both 'what' we do (the name

for the action that we characteristically perform) and that which we effect, the act and its consequences (Butler 1997:7).

Butler (1990, 1999) claims that gender is performative, which means that gender is always a question of doing, and that there is no obvious gender identity as man or woman behind the expressions of gender. Redefining gender from a natural category to a performative approach holds that gender is not what you are, is not a substance or a noun (1999), but what you are doing, a verb and performance. This might be a strange and radical thought for some, however I think that seen with a social constructionist and systemic lens, this stance is not bizarre. The concept of "doing gender" could be recognized within the systemic field, as systemic thinkers have been concerned to transform talk about symptoms such as depression

as nouns (for instance, in explaining that father is depressed), into talk about showing signs of depression, which liberates the individual from being the symptoms observed.

Performativity, heteronormativity and the 'heterosexual matrix'

Heteronormativityxxiv is a term used to designate how heterosexuality is constituted as the norm in sexuality. What is perceived as normal also influences what is seen as normal in couple therapy given the function of couple therapy as a societal and cultural service. The perceived 'normal' and 'natural' status of heterosexuality is presumed through the process of normalisation; it takes on the unquestionable position of being the 'true' sexuality, the natural order of things, primarily through the way that it is linked to the male-female biological binary and procreation (Robinson, 2005). Epstein and Johnson (1994: 198) point out that the normalisation of heterosexuality is "encoded in language, in institutional practices and the encounters of everyday life". For example, religious discourses and practices operate as significant components of the normalisation process of heterosexuality, particularly in relation to parenting and families; gay and lesbian parenting and families are often actively excluded from definitions of what is considered a family. Thus, the normalisation of heterosexuality is a social phenomenon that is actively negotiated, with its dominant discourses and narratives primarily constituted within the socially constructed cultural binary of heterosexual 'us' versus homosexual 'them': a powerful hierarchy in which heterosexuality defines and speaks with perceived authority about the 'other'. Institutionalised heterosexuality thus becomes the definer of "legitimate and prescriptive socio-sexual arrangements" (Ingraham, 1994, p. 204) and the norm by which all other sexualities are defined as different, illegitimate and abnormal.

Butler claims that it is the repetition of the performance of masculinities and femininities that constructs and reconstructs the masculine and feminine subject. Children repetitively perform their femininity and masculinity, in order to 'do it right' in front of their peers and others (Butler, 1990) and it is through this repetitive process that the feminine and masculine subject becomes defined and constructed. It is crucial to point out that the concept of gender

'performance' is always one enacted within strictly defined cultural boundaries; what counts as a performance of masculinity or femininity is rigidly defined and policed by the sociocultural context of the particular time. And here it is particularly important to discuss whether or not couple therapy is a service that actively contributes to maintaining the heteronormative

script as prior to other kinds of intimacy, because as seen in the history of marriage therapy,

sexual- and gender questions have deep roots in the grand institutions of church, school, psychoanalysis and medicine. A poststructuralist approach to gender critiques the idea that physical gender has a predetermined influence on cultural gender or that physical gender remains one of the last ontological categories (Butler, 1990, Mühleisen, 2003). The poststructuralist notion that individuals are shifting subjects who are volatile, contradictory and changing, rather than rational, unified and static beings, provides a crucial framework in understanding the continual complexities of taking up gendered identities and is the ontological position within which I place this thesis.

Summary and discussion of the literature Review

The aim of this literature review has been to look at how relevant literature and literature gaps legitimise my research agenda and have contributed to shaping and informing my research. I have selected literature to focus on the functions of taken for granted concepts of love and intimacy, in taking a critical approach to how, for instance, the theories of part I can be interpreted and read. Especially useful for the purposes of this research has been the poststructuralist research paradigm as it recognizes the constitutive force of discourse and discursive practices in both therapist's and client's choices of various discursive practices. In emphasising poststructuralist theory I also critique the psychological assumption of the unitary, rational character of the individual, implying that it is necessary to theorise and analyse subjectivity as multiple, not purely rational, and as potentially contradictory. The aim of this literature review has been to demonstrate that categories in couple therapy, such as

family, couple, gender, sex and therapy itself, are culturally constructed through the repetition of practice, research and citation, and repetition is the dynamic that establishes the appearance

of these categories as essentialist or taken for granted. At the same time, these categories are not static but challenged by new practices and loaded with varied meaning. This is a continuing discursive struggle and couple therapy is informed both by practices that maintain

the categories and those that challenge them with new practices.

The literature review has further pointed to gaps in the literature reviewed, and I claim that there is a gap between a Foucauldian inspired literature, which frames therapy as a regulative practice on the one hand, and the view that therapy also captures, faces and embraces the individual fine-grained experiences of psychological realities and a world of phenomena on the other. Reading this literature has therefore opened new questions and new themes for

discussion: what are the further consequences for couple therapy, what role should couple therapy take if personal relationship is viewed through the poststructuralist lens?

I have included Butler's analysis of gender as a fictive construct, because I think it is relevant to my understanding of couple therapy as a social construction informed by and informing sociological and cultural discourses of intimacy, gender, sexuality and love. Finally, through the process of writing up the thesis I recognized the need for new approaches to systemic couple therapy which I called discursive couple therapy - only to discover to my surprise that there exists literature on discursive approaches to therapy. A further discussion of discursive therapy will be given in the Discussion Chapter in connection with my suggestions for further development of the systemic couple therapy field.

In this chapter I will expand on the account provided in the former chapters and explain my research design in detail. The research process has been a most exciting methodological learning experience. I altered the phenomenological focus and approach suggested in the proposal to a discursive one. The aim of this chapter is to offer a rationale for my choice of methods and to outline the relationship between epistemology and methodology in this thesis, the research tradition upon which I have relied and how theoretical perspectives such as poststructuralist theory have influenced the research process. I will outline the research methods used for sampling, data gathering and production, and analysis. I will also discuss and explore issues of ethics and the role of self-reflexivity.

What was learned from the pilot study?

The pilot study turned out to be a watershed for a change of plan regarding methodology and the theoretical point of departure initially accounted for in my proposal. This move was from an analytical content-oriented approach informed by phenomenological theory to a more discursive turn drawn from poststructuralist theory. In the following I want to account for the process and assessments triggered by those experiences and reflections that led to the change of theoretical and methodological approach. The original planned research question in the proposal was: "What ideas are contained, both theoretical and at the level of personal values, within systemic couple therapy and how do these ideas appear in therapy?" My initial methodological approach was then phenomenological in nature, with the goal of tracing therapists' "images of love" used when doing therapy and the sources of these in beliefs, theories, and values. A phenomenological study is inspired by the philosophical perspective of phenomenology initially developed by Husserl and Heidegger (Føllesdal 1994) that holds that reality consists of objects and events as they are perceived or understood in human

consciousness and not of anything independent of human consciousness. The epistemological stance in phenomenology is therefore that humans conceptualise and recognise the world subjectively (Nerheim 1995) and it is the subject's interpretations of the world that are meaningful to explore. The initial plan for analysing the data was to do an Interpretative Phenomenological Analysis (IPA), developed by Smith (Smith 1996). The guiding idea of this method is to explore "the participant's view on the topic under investigation"

(Smith1996, Jarman & Osborn 1999). I considered an IPA approach because of the nature of the research questions in their focus on the "inner world" of therapists, and the goal of making this "inner world" explicit and "readable" with the help of this method. IPA is intended to help the analyst recognise levels of meaning, ideas and constructions arising from the "insider's perspective" (Conrad, 1987).

Initial plan for data collection

My plan was to use Interpersonal Process Recall (Kagan; Elliot, 1989) as a method of data gathering in order to obtain in-depth information through the study of selected moments from couple's therapy sessions. Interpersonal Process Recall (IPR) is an interview technique that enables therapists and clients to relive the experiences of counselling sessions (Clark, 1996). I considered this method to be a compelling and structured way to obtain rich material from the research interviews, as my original aim was to get as immediate a response reflecting the participant's thinking about her/his way of doing therapy as possible. I planned to videotape two therapy sessions held by each therapist and analyse them using the IPR analytic procedure. Essential to the IPR method is the extraction of significant events. In order to identify these, the recorded sessions would have to be viewed several times. To qualify as a significant event, the selected moments would have to be ones in which the therapist communicated or seemed to be communicating relationship beliefs.

The IPR procedure can be described briefly as three-part:

Phase 1 - Free Recall

The participant is asked to recall any moments in which she/he spoke about intimate relationship beliefs. The aim of this phase is to stimulate the participant to evaluate his/her contribution to the specific therapy session and to generate a rationale for their selection of significant events.

# Phase 2 - Audio-Visually Triggered Recall

In this phase, the participants review each extracted significant event. Immediately after having viewed an event, the participant is asked a series of questions related to the extracted event. These questions aim to have them recall, as comprehensively as possible, what they were thinking about and associating with when that particular event occurred.

This phase gives the participants an opportunity to comment on their experience of being interviewed.

The experience of the IPR method and the process of interviewing

The first interview was piloted on one informant, a female therapist, who I knew slightly beforehand, as we had met occasionally at systemic therapy gatherings. Though we had met and discussed the study prior to the interview and she expressed being comfortable with participation, the interview was more formal and tense than I had imagined beforehand. When the therapist watched the video she became concerned with what she could have done and said differently, and I began to actively convince her that truly, her way of doing this therapy was 'more than good enough'. It struck me when reading the transcription subsequently that the pilot interview resembled a supervision situation. When I asked, 'what was your thinking behind that question?' my rationale for asking this question was primarily to grasp the associated levels of thinking, but she responded by saying, 'I don't usually speak and act like this'. I responded, "I understand" and "Of course" whereby she continued to evaluate herself with statements like, 'Look at me, I look almost angry here and 'You must understand the context here, usually I don't say things like this to couples'. The dynamic that emerged was one in which the more I tried to promote in-depth exploration of her thinking and reflections, the more the situation resembled a supervision context. Subsequent to the second interview, I shared my experiences of the first interview with her and the therapist recognised the same experience of stiffness.

I decided finally to abandon IPR. The thinking behind this decision was manifold. The therapist's uneasiness in the interview organised me in such a direction that I became too hesitant to pursue my research intentions; I worried that this unintended dynamic could prevent me from getting the rich material necessary to illuminate my research question. Two

other aspects influenced and strengthened my decision to leave IPR as a method for data gathering, both of which concern context: the first is my role as a teacher/supervisor in family therapy in Norway and the second is the issue of compatibility between a chosen research method and the actual research question which is to be investigated.

My role as a teacher and supervisor in Norway

Norway is a fairly small country and therefore quite transparent. As I have been working as a family therapist at Family Therapy Guidance Centre it is plausible that therapists knew about this project and about my formal attachment to Diakonhjemmet College before I started to recruit participants to the project. As teachers tend to be seen as having an evaluative position,

it is not that surprising that the participant above became uncomfortable with my watching and exploring her way of conducting therapy.

The origins of IPR as a supervision strategy

Another reason for my rejection of IPR is its function as an initial method to increase counsellors' awareness of covert thoughts and feelings about client and self through promoting the expression of these thoughts and feelings 'here and now' without negative consequences in deepening the counsellor/client relationship (Borders & Cashwell, 1995).xxv Consider also that my particular interests were with how therapists perform their work in the space between the professional and private and how they negotiate between personal and professional issues; hence I could not risk that the therapists would be preoccupied with presenting themselves first and foremost as competent professionals. My experience with the pilot study strengthened the anticipated concern that the participants might be more vulnerable if subjected to research that seemed to focus on their skill level in performing their work. I do not claim that IPR is an inappropriate research method, but my evaluation of the different features discussed above led me to the conclusion that in research on sensitive issues, being observed and interviewed about one's way of doing therapy might be too stressful for the therapist's identity as a professional and that would be inappropriate for my research.

## 'Content' or Discourse?

A final but significant experience with doing the pilot interview was the insight into subjectivity that caused me to shift my attention from content to discourse in use in couple's therapy. This shift in focus stems from the experience of how the empirical material appeared in the pilot study. I expected the material to reveal the inner world of thoughts, beliefs and values of the therapists, and even more important, I expected to reveal more or less stable love

images reflecting how each therapist really thought about love and intimate relationships, such as what are therapists' actual opinions about infidelity?

My "surprise" during the pilot study, was that the therapist did not refer to a layer of more or less constant ideas, but positioned herself toward different discourses, and I will present extracts to demonstrate how the material reveals incoherence and inconsistency of beliefs, producing what I term polyphony of opinions. Polyphony is a concept inspired by Bakhtin and his analysis of what he defines as the polyphonic novel. In Problems of Dostoevsky's Poetics, Bakhtin explains how Dostoevsky creates the polyphonic novel by repositioning the idea of the novel, its truth, within multiple and various consciousnesses rather than a single consciousness and by repositioning the author of the novel alongside the characters as one of these consciousnesses, creator of the characters but also their equal (Clark and Holquist 1984; Morson and Emerson1989, 1990). Bakhtin claims that this new kind of novel is no longer a direct expression of the author's truth but an active creation of truth in the consciousnesses of the author, the characters and the reader, and in which all participate as equals (ibid).

"At any present moment of the dialogue there are great masses of forgotten meanings, but these will

be recalled again at a given moment in the dialogue's later course when it will be given new life. For

nothing is absolutely dead: every meaning will someday have its homecoming festival" (Bakhtin

quoted in Holquist, 1990, p. 39).

My understanding of Polyphony, then, is that a subject expresses different opinions and beliefs in any single dialogue, including incongruent, paradoxical and inconsistent accounts.

A defence of polyphony is important as attitudes to such inconsistency in a text or a dialogue could be interpreted as "messy" and as the result of poor research techniques. Ideals in both research and therapy vary from the goal of obtaining consistent and coherent accounts of the subject's meaning and opinions, to viewing polyphony as highly relevant and informative in

itself. Below is a concrete example of polyphony from the pilot interview. The therapist and I had watched a videotape of a session in which infidelity was a central issue. The woman in the couple had been unfaithful and the man expressed anger over this. As researcher, I regarded this sequence showing the man's anger as an opportunity to explore the therapist's attitudes towards infidelity. Analysing the data afterwards I located three different themes in which the therapist's utterances could be sorted, within (i) a general opinion about infidelity, regardless of any further contextual information; (ii) a therapeutic voice — 'what do I voice in my role as therapist when facing clients' infidelity experiences in therapy?'; and (iii) speaking from personal experiences of infidelity.

Theme 1: A general statement about infidelity as an unnatural act

Therapist: I think being sexually unfaithful is a contradiction, unnatural to human nature. Being sexually faithful has something to do with biological stuff. We need to be secure, to date and mate.

Theme 2: A statement of infidelity – seen from a therapeutic stance

Therapist: This woman is struggling a lot; I understand very well why she has been unfaithful

This is not the way she is, she has just been hit by this enormous love.

Theme 3: Personal experience with infidelity

I have personal experience with infidelity, and it expanded my perspective, meaning I became a wiser and more tolerant person.

The therapist navigates between a diversity of professional, cultural and personal opinions and beliefs about love in contemporary time. In retrospect, I think that the experience of the pilot study revealed the heart of my research topic, namely the blurred relation between what is theory, what is personal experience and how does such a blurredness influence the therapist's way of conducting therapy? Given these experiences I realised that I needed a conceptual frame that captured the appearance of an incoherent and inconsistent account of love.

Self-reflexivity and the pilot study

Looking back, I see that I could have done more to confirm the therapist in her role as a therapist, and even also encouraged her in her inconsistency, had I had an awareness of and disposition towards the fruitfulness of researching lack of clarity, breaches and polyphony instead of being preoccupied with gaining coherence and certainty. To sum up, the learning experiences with the pilot have influenced the methodology in shaping a research focus

different from that suggested in the Proposal. The decision to give up IPR as the method for data collection was taken after the pilot interview, and an open-ended interview was adopted instead. The decision to do discourse analysis gradually emerged through reading poststructuralist theory that corresponded well with my experience of the pilot. At the same time, this decision was demanding in that a poststructuralist reading was new to me and provided a new lens onto epistemology, ontology and choice of methodology. The shift from a phenomenological approach to a more discursive one represented both relief and new tension; relief because it seemed that the unexpected and irregular in the data would be captured more adequately by a discursive approach, and tension because this approach was new and challenged my initial plan of going in-depth to explore the therapist's soul.

In the subsequent analysis I will account for the methodology and the turn to language as a consequence of new reading and experiences with the pilot study.

Design

Here I account for how I have taken the decisions about shaping this research and refer to how the way my research was conducted. It is important to demonstrate how my research paradigms (poststructuralist theory, systemic theory etc) has influenced on, often in pragmatic ways, methodological choices such as sampling strategies, data collection, interviews and the process of analysing.

Ontological and epistemological stance

In the research project, poststructuralist theory and a systemic angle helped shape my choice of research paradigm and therefore my assumptions regarding ontology, epistemology, and methodology. At the same time, the paradigmatic assumptions stirred by, for example, knowledge acquired through employment as a couple therapist together with my own experience of love and intimate relationship, influence my theoretical basis. This circularity and interchange will be referred to as a process of emerging design: through the process of writing the proposal, conducting a pilot study and reading literature, life-experiences, clinical practice, dialogues and supervision, all led to an expanding dynamic of shaping a research design. The research questions have as a result of emerging design, been altered from "What ideas are contained, both theoretical and at the level of personal values, within systemic couple therapy and how do these ideas appear in the therapy?" to "An exploration of discourses in use by Norwegian couple therapists engaged in systemic couple therapy". The ontological position which informs this thesis considers reality and knowledge as subjective and constructed by words, perceptions, rules and culture and thereby relative in contrast to the

objective and neutral scientific model. This position might easily lead to a 'pure' social

constructionist position, in which knowledge and beliefs are difficult to grasp as stable and "true" constructions (Potter, 1996). Such a direction could result in an absurd research position. How can it be meaningful to investigate something that is so intangible that it only exists for a moment of time and is contingent on context and arbitrary conditions? A consistent and literally constructionist model might be too dogmatic in treating knowledge categories as if they were only arbitrary social fictions. I recognised this as a dilemmatic position throughout the research process.

However, my epistemological position holds that it is meaningful to talk about more or less firmly held views. A human being is always receptive to context and new ideas and has enduring viewpoints and knowledge as well as those in flux. I subscribe to a social constructionist view of knowledge that regards knowledge about the lived world as socially constructed (Gergen, 1994 b). This perspective emphasizes the impact of the clinician/researcher on the system and the consequent need to observe the self when conducting theory or research. A social constructionist perspective deals with methodology as interpretive in that the researcher interprets possible understandings and possible contexts for what is going on and possible consequences and implications these may have. My epistemological position inspired me to include poststructuralist theory and the concept of discourse as an epistemological concept most relevant to understanding how we know what we know. Contained in a poststructuralist framework is the critique of the grand narratives of the Enlightenment, the emphasis on language as constitutive of reality rather than merely reflective of it and the use of deconstruction as a reading technique to capture language as a process of play with and deferral of meaning (Davies 1997). The importance of deconstruction, that categories and terms may be critically explored with regard to the meanings they may express and the effects they may have (Gergen, 1994 a) is as a concrete tool for the realization of the epistemological position described above. A practical question of methodology has been how to position myself relative to my adopted epistemological perspective such that the research question, process and outcome make sense in the context of

the practice of therapy and professional training.

#### Qualitative Research

Within a qualitative research paradigm, reality is subjective, multiple and construed by all the participants in a particular research study; at the same time, a qualitative research paradigm claims that social reality can be known and investigated. I considered a qualitative approach because it serves my aim of developing knowledge for application in a context of systemic

practice and it corresponds well with the paradigmatic assumptions of a systemic approach; skills required for conducting a qualitative research interview are similar to those required for a therapeutic interview (Burck, 2005).

Although qualitative research is an inductive, circular process, strictures regarding methods of data collection were placed by the Research Ethics Committee at Tavistock (Appendix 4) and

The National Committee for Research Ethics in the Social Sciences and the Humanities in Oslo (Appendix 5), so a decision to interview clients was not feasible.

## A systemic perspective

There are many parallels between the thinking of the qualitative researcher and the systemic therapist (Burck, 2005). The systemic orientation of this project approaches qualitative research as a relational practice with the practical implication that both researcher and participants are dependent on each other and play a reciprocally significant role in the investigation (ibid). The methodological challenge has been to integrate this aim in the research design, the analysis and theoretical discussions; one aspect of this is the dilemma that the researcher has the main responsibility for progress, ethics and design and it is not clear what co-creation and dependencies mean in practice. Systemic theorizing in the last two decades has explored the implications of adopting an epistemological approach which is not committed to an idea of social reality as 'out there', observable by a detached observer, and which accepts no sharp divide between objective and subjective aspects of knowledge (Wren 2000:21). Systemic therapy and constructionist research have three dimensions in common; firstly both involve keeping context in mind; secondly both emphasize meaning as an act of co-construction in a dialogue, including multiple perspectives; and thirdly, there is a commitment to the significance of reflexivity towards the questions and issues initially raised, the problem-solving processes and the role of the researcher/therapist. Familiarity between research and therapy is present in an attitude to language and knowledge as constructions and narratives, in the methodological approach of conducting interviews as research processes informed by curiosity and reflexivity, and in the acknowledgement of multiple perspectives, dilemmas and contradictions (Burck, 2005). Finally, a conceptual framework borrowed from the field of systemic practice was applied in this study. This framework has informed particularly the process of data collection and the analysis. I consider that my application of systemic and narrative principles has had a concrete influence on the data collected and my approach to the process of analysis.

Sampling strategies and Sampling criteria

The aims of this thesis in outlining what discourses are in use and their interplay in systemic couple therapy can be seen as different but related. A methodological challenge has been to consider which methods relate most appropriately to these aims. Choice of sampling strategies

represented one of the first methodological challenges. It was clear from the start that I wanted to interview therapists employed in Family Therapy Guidance Centres and not therapists running their own private practice. Two arguments support this decision: the first is political-ideological and the other professional-theoretical. The fact that Family Therapy Guidance Centres are free of charge to clients, subsidised and administered by the municipal government might reflect a politically charged image of importance and priority and carry a political message. As an employee in the public domain, one is more or less committed to the political messages dominating the domain, or at least implicitly obligated to the norms, values, rules, and ideals shaped by governmental direction. Of interest to me was whether the political decision to offer this service free of charge influences therapists in their way of doing therapy, and whether this influence in the end is more politically governed than therapists are perhaps aware. The nature of such influence might be complex; it could be said that the political program is to preserve the nuclear family but also to promote a more radical political program, as in support for single mothers and partnership within same-sex relationships. Whatever such political intentions might be said to be, it seems likely they influence therapists in different ways than if there were non-political priorities guiding the service.

A second argument for recruiting therapists from Family Therapy Guidance Centres was professionally inspired, namely that in Norway staff in almost every Family Therapy Guidance Centre have been trained in systemic thinking and practice. Therapists working at Norwegian Family Therapy Guidance Centres are relatively homogenous with respect to characteristics such as professional training and clinical practice. Although they vary in age, educational background, gender and degree of therapeutic experience, they are relatively equal in 'cultural capital' (Bourdieu, 1986).

Besides the criteria that the therapists should be employed in a Family Therapy Guidance

Centre, I ended up with three specific criteria for participants: being experienced, systemically

trained and having time and space for involvement. Having time to participate turned out to be the most important criterion for the sampling strategy. This strategy of recruiting volunteers is called purposeful sampling 'in which particular settings, persons or events are selected deliberately in order to provide important information that can't be gotten as well from other choices' (Maxwell, 1996 quoted in Eng, 2003).

I started recruitment with an open request to several offices with the aim of making appointments with some of these to inform about the project and recruit therapists. I visited 6 offices in total and counted approximately 10 therapists who were interested though half of these withdrew their interest. Arguments given for withdrawing from the project spanned from time issues, video problems and private issues. However, in the end, the sampling process was a fine experience, since I mostly met willing and motivated therapists.

## **Participants**

I ended up with 5 therapists, two men and three women, all well experienced and with more or less the same professional background. All reported living as heterosexual and ranged in age from 40-60 years.

#### Anonymity issues

In order to preserve the anonymity of those who volunteered to be interviewed, all names and potential

identifying information used to refer to the participants has been fictionalised in a "T construct."

This T construct is my radical attempt to neutralise the participants' demographic facts and personal narratives in preventing these from being recognised. In my work with the material, I attempted to change for instance gender and city of residence, but as I did this it struck me that gender, demography, age and profession had become irrelevant to the analysis and I decided to combine the therapists' voices into one, namely "T". I have operated with a construct of T, comprised of extracts from the material without the traditional "female therapist, living in Oslo, age 40" - just T, making it impossible to trace who is speaking.

Another reason that does not primarily concern anonymity but is more analytic is that the discursive focus became more readable without me as the interviewer being overly occupied

with gender, age and professional identity. I will argue that this choice made me more attentive to the discursive orientation in the text when freed from the biographic facts. However, it can be argued that there are costs in loss of meaning and understanding in the exclusion of such biographic facts as for instance gender, but gender issues appear in any case in the analysis as gendered discourses. I think of discourses as gendered to some degree independent of whether it is a man or woman speaking and in a poststructuralist reading, gendered discourses are not obviously connected to whether a particular man says something or a particular woman something else, but to how these discourses are constructed as the cultural production of discourses about gender.

Data and the data collection process

In the following I will account for how the data were collected, (the interviews, video extracts, observation notes) and how the informed consent procedures were employed, to explain how the material was gathered and how I approached it in the analysis.

Informed consent

The procedure of informed consent was followed by distribution of an information sheet to the potential participants where they were given a summary of key aspects of the process such as data gathering, analysis and ethical issues involved (Appendix 2). They were also informed of the right to withdraw from the project at any time, with no obligation to me. They were also assured of anonymity and of how I planned to use the data in the study and subsequent publications. The participants were then asked to give their written consent. For the video tapes, the participants followed the standard procedure of written consent for Family Therapy Centres when video-taping therapy sessions. All the clients involved, were presented for the research project and have had given permission for the research. Some clients withdraw from the research since they were not interested in participate in a research which was about therapists, and one of the explanation they gave was that the therapist would be too disturbed by being researched on, and they needed a therapist paying full attention to them.

In-depth interviews

There is no common procedure for interview research. Interview research is a craft that if well carried

out can become an art. The varieties of research interviews approach the spectrum of human

conversations. The forms of interview analysis can differ, as widely as there are ways of reading a

text. The qualitative interview is sometimes called an unstructured or a non-standardised interview.

Because there are few pre-structured or standardised procedures for conducting these forms of

interview, many analyses of the methodological decisions have to be made on the spot, during the

interview. (Kvale 1996:113).

Kvale (1996) categorises the qualitative interview as a type of conversation and he talks about a context of basic modes of knowing as a theory of knowledge in which conversation is seen as the ultimate context within which knowledge is produced and re-produced. This way of thinking about knowledge resonates with important concepts in the systemic family therapy literature, such as the not-knowing position (Anderson & Goolishian, 1992).

The period of data collection spanned 6-8 months. I had scheduled it to be approximately 4 months but it was more time-consuming than expected. The main reason for this delay was

the decision that the participants should send me a video before the first research interview so I could prepare to interview them about selected extracts from the video. Obtaining videos turned out to be problematic, because some couples hesitated to be filmed, others did not show up to the session and there were practical problems with the video equipment. The procedure of watching a video was followed with all the participants, but a criterion for the second interview in my initial plan was for the therapists to bring a new video before the second interview. The reason I abandoned this was that I realised the videos were not the main source of data, merely supplementary to the interviews. Surprisingly however, when I dropped this criterion of the second video, they began to appear quickly during the second round of interviewing. The context of the research interviews was usually that I met the informants for a short meeting first, to go through information about the project. All the interviews took place at the informants' workplace, with the exception of one participant living outside of Oslo who wanted to combine it with a meeting in Oslo. Most of the interviews included viewing one or two taped video sequences of the informant doing therapy, and the aim of watching these videos together was to get another kind of material than that derived from just "talking". Videos were used as trigger points, recall aids, and as a simple way to start the interviews from a common point of reference.

Interviews:

Participant A x 2

Participant B x 4

Participant C x 3

Participant D x 3

Participant E x 2

Interviews in sum: 14

Each interview lasted a minimum of 11/2 hours up approximately 4hours. One of the interviews was held outside Oslo, and because of lengthy travel time, the interviews in this case extended to a total of 4 hours. Initially I wanted to have two meetings with each informant, but I had to be flexible when I realised that it was worth spending time to ensure the informants felt secure enough to talk about both personal and professional aspects of their own work. As a consequence of meeting an informant up to four times, I found that the nature and the quality of the material changed from the first to the third time.

Transcription

Every interview was transcribed. I did one of the transcriptions myself while the 13 others were done by a paid assistant. I have conflicting thoughts about the strengths and weaknesses of transcribing myself. I found that the value of this was that memory and new reflections emerged while revisiting the interview during transcription. At the same time, having the text transcribed offered a sort of distance to the interview and I was able to focus on the text in itself. The transcription system used in the interview extracts here is a simplified version of the Jefferson system (Wetherell & Potter, 1992). This version places most weight on semantic content. The symbols used are straightforward:

A dot in brackets indicates a pause, e.g.: (.)

Inaudible material is indicated by 'xxx' in round brackets, e.g. (xxx)

Laughter is indicated by ("laughter")

Overlap is indicated by ("overlap")

"A" is used for the researcher, "T" for the therapist/participant.

The videos were not transcribed but are to be regarded as part of the material, as I have included extracts from them in the analysis. The challenge was to maintain a conversational atmosphere so that sensitive information could come up. Talking about informants' associations in watching their videos showing them doing therapy was a conflicting experience. Following my experiences with piloting, I was interested in a methodological approach that could make the interviews less stiff and formal.

Interviewing skilled interviewers

It was an interesting experience to interview colleagues very experienced in the arts of

interviewing and conversation. What are the benefits and possible traps, when a therapist interviews her colleagues in the service of research, if any? It is probably the case that this context affects the interviewer most. I was aware of the participants' reactions, whether they evaluated me as an interviewer and how I adapted and adjusted to their implicit communications about how to navigate. I did orient actively and variously to the task of small talk, making myself less confrontational, less distinct and not performing in an overly "professional" manner in dialogues. I positioned myself as an equal in the situation and was perhaps too occupied with not revealing a repertoire of communication skills that would have been useful in obtaining richer material. Initially I planned to make use of a semi-structured

interview guide, and during the process of interviews I constantly altered this in light of the
experience of interviewing. Examples of issues from the semi-structured interview guide:
Demographic information
o Age, place of birth, place of living, civil status,
History of working as a therapist
o How would the therapist narrate the idea of being a therapist
o Why work as a couple therapist in particular?
Own relationship experiences
o how have these experiences affected your work as a therapist and vice versa

Beliefs about love and role of sexuality
• Preferred working models in couple therapy
• Questions about queer issues
o How are your experiences with working with other couple-constellations than
heterosexual couples?
o What is your thinking about queer lifestyles?
• Specific issues I raised and introduced with the aim of obtaining data on more
discursive issues:
o "As a researcher, I think of information and knowledge as part of a dialogue; I
am not looking for 'correct' information and I am aware that we are fellow
persons in relation to the issues we will now discuss. I am not preoccupied
with set views, but want you to talk about topics in your own way."

# " Friendly conversations "

During the interviews I experienced situations similar to friendship/friendly conversation; one of the therapists said explicitly that this was "absolutely like talking to a friend" and I remember nodding in response and laughing slightly, though I really did not know how to respond verbally. Looking back I realise that such utterances informed my management of the interviews, in my search for balance in how or whether to bring my own experiences and reflections into conversation when the participants approached sensitive information. They brought forward quite intimate stories and some of them remarked on this by saying, for example: "I have never spoken to others about this" and "Please turn off the tape-recorder, because this is very private ". And when I turned the tape recorder off, I felt sometimes that the participants wanted me to disclose something about myself in response to their narrative. On reflection, I think I could have been more sensitive to this and shared more of my own reflections without losing the position of researcher. I also realise that a friendly conversation in the interview context could be said to be difficult to manage, for example in making me less attentive to obtaining information that could disturb the friendly atmosphere, such as critique, disagreement or provocative information. Being friendly in a research context easily

might lead to the exclusion of difficult topics that could be relevant data. It is interesting to question what the participants perhaps understood the aim of my research project to be, over and above the stated aims. I have not asked them, and it might just be speculations, but one hypothesis connected to the "friendly" atmosphere is that some participants might have thought that my aim was to find answers to questions such as what is love, and how should one live love in life on a personal level, and in that context they shared on a very personal level with me.

Observation

I employed observation as a supplementary data source in the study. I used a very simple observational method, observing the therapist working, either behind a one-way mirror or/and watching tapes in which the therapist was doing couple therapy. This was done taking into account a definition of language as embodied and communicated through bodily movements. Seeing the therapist encounter tensions and difficulties and having the possibility to talk about it afterwards provided a means of obtaining another kind of information than that derived merely from talking about what the therapist does.

Analysis: Towards a poststructuralist approach

As accounted for earlier, I turned towards a poststructuralist approach as my theoretical stance

in this study. I will present here some of the poststructuralist thinking particularly relevant for this methodology section. I find it difficult to entirely summarise in its entirety what poststructuralism

is, but the following issues and claims have been informative for my methodology.

The revolt against an essentialist approach to language and research

Previous research on romantic relationship beliefs has investigated beliefs as a matter of measurement, and implicitly addressed subjects as capable at any time of giving a coherent and consistent view of their beliefs (Øfsti, 2002). The thinking informing that kind of research is that beliefs can be selected referentially and then clustered. An essentialist approach holds that the phenomenon of expression is a result of an immanent "being" or force, which will expose or picture itself independently (Søndergaard, 2000). These ideas can be identified in research which aims to explore gender differences as caused by biology, where biology is a concrete example of something both immanent and as an essence with epistemological and ontological status with precedence over, for instance, a view of gender as

performative and culturally constructed. It is this underlying assumption of the phenomenon as immanent, stable and with an independent existence that is the focus of the poststructuralist

critique. Within a poststructural frame of reference, an essentialist approach is critiqued for its failure to take into consideration that meanings are not singular but multiple, and the subject is not seen as rational with a unitary character of subjectivity, but socially and historically produced through signification (Hollway, 1984) in terms of the multiplicities of self. This claim of the multiplicities of self is raised against a theory of self as embodied in pronoun grammar and in which persons understand themselves as historically continuous and unitary. So categories in poststructuralist theory are not revelatory of or mirroring the real world but are to be seen as existent only through our repetitive statements about them; changes in these categories and statements will in turn break with the "reality" these categories postulate (Butler, 1990, 1993). This view has consequences for how one frames the subject. A post-structuralist understanding of language views language as something that shapes rather than reflects reality (Søndergaard, 2002) and thereby questions a theory of self embodied in pronoun grammar in which a person understands themselves as historically continuous and unitary. This leads to regarding the subject in performative terms rather than as a referentially coherent and consistent subject (Butler, 1990, 1993)

## Foucault on knowledge and power

Foucault's analysis of the relationship between power and knowledge is important in understanding the aims of poststructuralist research. Foucault has a positive account of power, in Foucault's (1982) words, "power induces, it seduces, it makes easier and more difficult" (ibid: 220). A misleading perception of power according to Foucault (1980) is power seen as repression or force such that subjects are seen as interfered with and steered by authorities such as the government, and that such control can be clearly recognised as power execution and as control by those who are its victims/objects. Power in this view is something that stands in a negative relation to the objects of power. Foucault argues that one has to avoid this

definition of power, and instead explore how an analysis of power exposes itself and is operant in modern societies. What characterises power execution is the repression of opinions and perspectives, and this repressive function is so effective that people do not realise it is occurring. In modern societies, power is dispersed through different levels of social structure and to different groups of people. Members of the helping professions play an important role in this power execution through their implicit function as verifiers and initiators of norms and

rules. The advantage of this kind of control is that as control or force is not recognised, people cannot really oppose it (Foucault, 1980).

According to Foucault, techniques of knowledge and strategies of power are mutually intertwined. Power is based on knowledge and makes use of knowledge essentially nonneutral,

as it determines power relations, as power is not a thing, but a relation. The notion of power-knowledge is therefore likely to be employed in critical, normative contexts. Power is then to be seen as productive of knowledge, meaning, values, and of certain practices as opposed to others (Foucault, 1981).

Foucault's body of theory has relevance for this thesis, in illuminating the power–knowledge relationship; namely the fact that power today is dispersed and tied up with the production and reproduction of what could be seen as dominant discourses such as those of sexuality, love, reproduction and family. This in turn emphasises how therapy as governed by the municipal government represents a disciplinary process of opinions, meanings and practices, and is to be seen as more than just a "talking cure" but also as a strategy of discursive formation or scientific discipline (Foucault 1972,). Below, I will go more in depth in demonstrating how I have made use of a Foucauldian conceptual framework in applying a poststructuralist discourse analysis.

# **Discourse Analysis**

According to Burck (2005) "many systemic therapists are concerned with the interweaving of discourse, power and subjectivity" (Burk, 2005:251) and my experience with doing a discourse analysis is that it has many parallels with conducting couple therapy. Philips and Jørgensen (2002), present a well-documented overview of discourse analysis (DA) as research method, and according to this overview, DA is developed from different sources. Basically,

DA draws on theoretical perspectives from discourse theory, among them those of Laclau and Mouffe (1985) and from perspectives outlined within discursive psychology, for instance those elaborated by Edwards and Potter (Edwards, 1996, Edwards and Potter, 1992, 1996; Burman and Parker, 1993; Gill, 1996, 2000 and Wetherell, 2001).

Willig (2001) explains discursive psychology as an approach concerned with psychological phenomena such as memory, attribution and identity but where these phenomena are conceptualised as discursive actions rather than cognitive processes (Willig, 2001) and this

focus, for instance on attribution as discursive practice makes actions such as legitimatising, justification, categorising and rationalising important for an analysis of how the participants within different contexts, manage their interests and values (ibid). A further consequence of viewing psychological phenomena as discursive is that concepts such as identity and beliefs become things people do rather than things people have. A discursive psychological analytic focus is on how participants use discursive resources and the effects of these practices rather than on mapping out participants' cognitive objects as thoughts, beliefs, prejudices and hopes.

I have not applied one clear and distinct variant of discourse analysis, but borrowed what I have found useful from the different descriptions of discourse analysis available. Central to my approach is the literature of discursive psychology and a Foucauldian variant of DA.

Below I will account for the concepts and theory informing my analysis.

# A Foucauldian discourse analysis

A Foucauldian discourse analysis is concerned with language and its role in the constitution of social and psychological life (Willig, 2001). Discourses are comprised of statements which must be spoken from somewhere and by someone, and this speaking entails the bringing into being and positioning of a subject and assignment of a subject position (Foucault, 1986, cited in Harding 1998: 19-20). An important focus in discourse analysis has been to highlight and explore power aspects of discourse, as in Foucault's analyses of power and knowledge.

Discourse analysis focuses therefore upon what can be said by whom, where and when (Parker, 1992) and examines the discursive resources within a culture with ideas such as the discursive economy (Willig, 2001).

The definition of discourses as constructions that make available certain ways of seeing the world has consequences for the study of how discourses offer subject positions to take up and therefore also for understanding experience. For the aim of my research it is necessary to include discourses as practices rather than structures or superstructures that are lived, acted

out and spoken by individuals (Davies & Harre', 2001). Discourses operate both as arenas of action and as fluid and mobile 'relations' and interrelations which produce and transmit knowledge and power relations (Foucault, 1980) and this analysis employs the much-cited concept of discursive practice. Further, according to Davies and Harré (2001) different discourses may exist side by side within a field. They may be mingled and adapted to each other, or they may be competing and imply tensions or conflict. People position themselves

within different discourses and shift between discourses. Discourses are implicated in the exercise of power as for instance dominant discourses privilege those versions of social reality that legitimate existing power relations and social structures (Willig, 2001).

The practical discourse analysis that has inspired me is the analysis of the origin or archaeology of terms and language in Foucault's studies of madness (1973) and sexuality (1976/1981). It is useful for my research focus to employ a Foucauldian version of discourse analysis that addresses the relationship between discourses and institutions. Discourses are bound up with institutional practice in that they serve as ways of organizing, regulating and administering social life. Therapeutic discourses are concretized in language and take the form of questions, interventions, reflections and at times direct advice. Advice is often a construction of privileged dominant discourses, and might have the effect of legitimizing and reinforcing these same dominant discourses in society. In light of this, institutions in a Foucauldian sense have the function of stabilizing and maintaining social practices; these institutions are namely informed and formed by the dominant discourses, which through discursive practices in turn reinforce these same discourses as dominant and privileged. At the same time, there is also a dynamic process of change underway in society, seen not least in the field of family therapy. Specifically, practices of intimacy and sexuality have undergone changes in the period of modernity and late modernity. These new practices influence our ideas and discourses that in turn give rise to still more new practices, as well as alternative discourses and counter-discourses. Giving advice in situations of infidelity is one example of the complexity and power of the intersection of discourse and practice.

The multiplicities of self and meaning in poststructuralism

The claim of the multiplicities of self is raised against a theory of self embodied in pronoun grammar in which a person understands themselves as historically continuous and unitary (Davies & Harre', 2001). The former account views contradiction as an expression of choice and the possibility of agency.xxvi Subjects participate in various practices, within which

meanings are allocated to these categories and story lines through which different subject positions are elaborated. The self is positioned in terms of categories and story lines. This involves imaginatively positioning oneself as if one belongs in one category and not in another and the recognition of oneself as having the characteristics that locate one as a member of various subclasses of dichotomous categories and not of others. There is also an

emotional commitment to category membership and the development of a moral system organized around this belonging (Davies & Harre, 2001). Mouffe (1992) claims that we can view the social agent as constituted by an ensemble of 'subject positions' and people shift from one to another way of speaking about themselves as the discourse shifts and as their positions within varying story lines are taken up.

Objects of analysis and how the analysis was conducted

In this section I will demonstrate how a poststructuralist frame of reference employed in different modes influenced the methodological process. Søndergaard (2002) claims that "poststructuralist inspired analysis is not something that can be learned as a linear procedure with concrete steps "(ibid: 61) and the following concepts have guided my analysis in deciding how to read the material and the selection of extracts.

#### Discursive constructions

In the main analysis I considered discourses as "sets of statements that construct objects and an array of subject positions" (Parker 1994:245). Discourses make available different ways of seeing the world and certain ways of being in the world. In the analysis, I read and re-read the transcriptions looking for sections in which discursive objects, such as "infidelity" or "intimate relationship" was talked about, and how these were accounted for in the text. As discourses also are constructed through what is not explicitly said (Gill, 2000; Willig, 2001) I paid particular attention to such possible constructions. Examples of an implicit construction of a moralistic discourse appear in the Analysis and in the example below.

# Discourses

A challenge during the task of analysis was to decide what was a discourse and what were fragments of a discourse. I have employed four notions of discourse to capture nuances in the

material: discourse, sub-discourse, echoed discourse and counter discourse.
OBJECTS
EXAMPLES FROM THE MATERIAL
Discourse: "a moralistic
discourse about infidelity"

A male client asks the therapist whether his wife's unfaithfulness ought to have any consequence in terms of her right to be with their children, and the therapist answers, 'she should not feel that she has

a moral right to the children'. I interpret this utterance as an implicit reference to an old discourse that if you are unfaithful you should be ready to take the moral consequences: because of the way the client finds it relevant in a therapy context to ask this question and in the therapist's not questioning why the client raises this issue., Instead, the therapist both directly and implicitly takes a stance in relation to the question as if it is a moral issue.

'Sub-discourse': "a wiser

wise"

The therapist is talking about the man's reaction in terms that suggest he has no right to judge her because of her infidelity. The therapist explains to the client: Your wife is a person who can't help falling in love, and you have to understand that you must stop your striving for support from everybody by telling the bad story about her repeatedly. You are the one who will lose in the long run by doing that.

By positioning the wife as a victim of her own feelings and by explaining to the client that he will lose by doing what he finds legitimate reason to do, the therapist draws on a sub-discourse of 'wiser wise', which is a sub-discourse of the moralistic discourse, in one way legitimating the moralistic aspect but trying as well to deal with what is the best (most wise) thing to do in light of the

reality of the infidelity.

'Echoed discourse': "whore

and Madonna"

An implicit discourse here could be said to address gender and motherhood, as conveyed by how the husband speaks about his wife. He questions whether she is in a mid-life crisis, perhaps even 'psychotic' while still asking whether her absent-mindedness when with the children –as exemplified in her telephone conversations with the other man when the children are in bed – are acceptable. It is possible to hear an echoed discourse here of "Madonna-whore" underpinning and influencing the gender discourse in the man's questioning of the trustworthiness of a mother having an affair. Women should first of all be mothers, and not sexually active

outside the home. The echoed discourse emphasizes a historical discourse that legitimates men's construction of women as wives, with an emphasis on key words such as protection, care and love, or as prostitutes, with key words such as temptation, taboo and sexuality.

'Counter discourse': infidelity

as being "out of control"

The therapist constructs infidelity (see above in this schema) as the person in love being 'out of control'. In such a discourse, the unfaithful person is framed in a context free of blame that favours a permissive discourse over a moral one. What makes her not blameable is the fact that she is in love: it is more acceptable to be unfaithful if you are a serious person who has truly fallen in love rather than someone who is just fooling around. Here being 'serious' feeds into another discourse - that of helplessness in the face of love. This notion of falling in love is in contrast to that of an extra-marital encounter as intentional rather than random.

Action orientation

With action orientation I refer to "the context within which an account is produced providing

the analyst with information about the organization and the function of the account" (Willig, 2001: 110). A focus on subject positions makes it possible to view the subject - in this case the therapist - as an agent and a doer in the world, as opposed to an isolated entity such as in many psychological theories, or as a person determined by structures such as in a traditional sociological framework. The subject, rather, becomes active and creative, in-between different discourses, actively shaping new knowledge in the communicative space between different/various discourses and lived experience. For example, when the therapist encounters what she might perceive as moralistic attitudes he or she might in turn engage a subdiscourse in response to her perceived role as a serious person, the one whose responsibility it is to take a wider perspective. What she performs is a 'wiser wise' when she challenges the client's opinions about his wife's infidelity, and in her opposition to merely being morally reactive within the context of ordinary, common-sense talk.

#### **Positioning**

A subject position within a discourse identifies "a location for persons within the structure of rights and duties for those who use the repertoire" (Davies and Harre, 1999:35). Discourses construct subjects by making available networks of meaning that speakers can take up. For example a moralistic discourse of infidelity contains the subject position of the blamer but also that of the socialised, moralistic responsible one. Positioning is the discursive process whereby selves are located in conversations as observably and subjectively coherent participants in jointly produced story lines (ibid). Subject positions are different from social roles, in that they offer discursive locations from which to speak and act, rather than introduce or prescribe a particular meaning to be acted out (Willig, 2001). Central to understanding subjectivity is the role of choice, or agency:

The subject as a maker is thus able to make choices, but only under the regime of available discourses;

choices are understood as more akin to 'forced choices' since the subject's positioning within particular discourses makes an attempt to go beyond an understanding of the subject as fully determined by the working discourses when she claims that the identifactory processes through which

norms are materialized enables the formation of the subject who is capable of resisting those norms."

(Butler cited in McNay 1999:177).

## Practice

Discourses open up or close down possibilities for practice. With the notion of practice I mean the kinds

of actions available given the differing constraints of discourses. Therapy is a context in which clients

often seek advice about how to live and deal with various situations, for instance losing one's partner to

another. A construction of infidelity as an immoral act makes possible for instance a practice of securing

social support. An analysis of practices is also presented in the Analysis Chapter where I look at how

therapists construct advice giving as acceptable and unacceptable (p.142).

## Subjectivity

In exploring subjectivity one is concerned with what can be felt (Willig, 2001). In the material I searched for what kinds of subjective experience for the therapist and the client might be said to be made available by different constructions of, for instance, infidelity as an immoral act accompanied by emotions such as guilt, on the one hand, and being "unable to help it" on the other. A helpful guide throughout the analysis was to think about discourses as deployed by people to manage relational pain, and therefore I searched for what could be said to be moralistic, religious or existential discourses in my material, as they offer a repertoire

for how to find meaning in life faced with experiences that seem to be meaningless. Another guiding thought has been the idea of subject positions that allow subjects to position themselves differently in relation to problems, challenges and difficult situations, making subject positions in themselves a focus for research.

#### Interpretative repertoires

Interpretative repertoires can be understood as 'broadly discernible clusters of terms, descriptions, and figures of speech often assembled around metaphors or vivid images" (Potter & Wetherell, 1995: 89) and as "available resources for making evaluations, constructing factual versions and performing particular actions" (Wetherell & Potter, 1992: 90). The notion of interpretative repertoires usefully mediates between the enabling and constraining effects of Foucauldian 'discourses' on the one hand (Parker, 1992) and the contextualised discursive flexibility that characterises conversation analysis on the other (Sacks, 1992; Sacks, Schegloff and Jefferson, 1974). Billig (1991) states that social psychologists have too often assumed that "an 'attitude' is a mental reality, and that in speaking their attitude people are giving outward expression to an inner mental state. It is the inner state that is presumed to constitute the reality of the matter. For the discursive social psychologist, this assumption needs to be theoretically inverted; the giving of the attitude – the use of attitudinal language - is the reality which needs to be studied." (Ibid: 15).

In the analysis I searched for how the participants drew upon categories and terms which in themselves needed to be analysed and deconstructed - such as "being in love", "infidelity" and "romantic"- because these carry much implicit meaning when conveyed in the therapy context as professional insight and in accordance with guidelines. The presence of tensions and contradictions among the interpretative repertoires used by speakers demonstrates that the

discursive resources upon which people draw are inherently dilemmatic (Billig et al. 1988;
Billig 1991). Chapter 7 on Love presents examples of 3 interpretative repertoires of romantic love: 'love hurts', 'the virtue of love' and 'heart of hearts'.

# Choice of extracts

The research interviews were tape-recorded and transcribed for analysis. My overall intent when reading the material was to explore the ways in which a social reality such as therapy considered a 'talking cure' is constructed through language within the particular context of

couple therapy. What has guided my selection of excerpts has primarily been my curiosity when reading the material, as for instance when during transcription I noticed the passage quoted below, as a narrative that exposes something I have heard a lot in various contexts, namely regret and evaluation in the aftermath of infidelity. I employed this extract to the analysis of a discourse of first being in love and then regretting with the evaluation of the subject included:

T: Once upon a time I fell in love... after I got married. It is a long time ago now. I had a relationship

with another person. We lived at the time in a small town on the west coast. It was a Wednesday, and

my lover and I were walking along the beach. Then I saw my spouse and child driving by, with a Christmas tree on the roof of the car, and they passed us. They didn't see me, but I felt so guilty and

ugly. I had had a wonderful time with the other person, but at what price? Looking back, I could have

done without that experience... . My goodness, think what I was risking for such a jerk!

Secondly, informed by the choice of doing discourse analysis I started more systematically to select extracts which served the discursive aim of the research and that were suitable to demonstrate discursive dynamics in the analysis. Criteria for the selection of texts were their ability to demonstrate how discourses are produced, stabilised and constructed, and also instances in which the participants constructed what can be seen as potential solutions to problems (Gill 2002 in Bauer & Gaskell, 2000). The example below demonstrates how a statement is constructed as an answer to a debate in the culture about whether there were better ideals and norms "before", and as an answer to what many would call the postmodernist tendency to fragmentation and disintegration:

T: I think nowadays young people ... they go out separately. They have different needs. So she goes

with her friends and he gets jealous and then he goes to a pub with his friends [...] Instead of in my

time, when they either went together or stayed at home [together]. [Going out] separately to the pub...

It's become very common. I don't think it's healthy.

Thirdly, looking for implicit constructions (MacNaughten quoted in Willig, 2001) of love were important selections, such as therapists' statements such as "this relationship is unhealthy". I coded this and similar categories as breaches with the systemic attitude exemplified by, for instance, the Milan approach, which strives for neutrality, circularity and hypothesising (Selvini, Cecchin, Prata, Boscolo, 1978, Cecchin, 1987) in order to realize the practical outcome of not evaluating others' relationships in terms of good and bad, healthy and unhealthy. I have not aimed for these excerpts to be seen as representative of how the participants talk and argue.

For instance, I wondered during the process what to do with extracts that do not necessarily at first glance fit into a discourse analysis but which still awaken curiosity in me in reading them, like this excerpt:

T: And I've longed a lot for that real love. To be... what kids long for... and that you maybe long for

your whole life. That someone loves you just the way you are, without any make-up on and with all

your grime and everything else. And loves you maybe not just in spite of your flaws, but maybe because of them, that you can for example love a scar, and think that the scar is beautiful because

you're in love, and every imperfection is kind of part of it.

Experiences with reading text in a performative manner

The concept of interpretative repertoire and the procedure of discourse analysis presented above were of practical use in helping me to keep in mind the discursive project of how text seems to be "doing" more than merely "saying". This represented a new exercise for me, as I am trained as a therapist to look attentively at content in a phenomenological mode rather than

for what a text is doing. The latter involves looking out for interpretative repertoires or discourses that organize text, signalled by repetitive idioms or metaphors. Speakers use discursive consistency and variability to carry out such interaction projects as explaining, justifying, warranting and managing their own accountability (Billig, 1988, 1991; Willig, 2001; Søndergaard, 2000). One of the helpful questions for me in keeping an awareness of a discursive reading of the data was, 'why am I reading this passage in this way?' A discursive method pays close attention to the constructive and functional dimensions of discourse. To facilitate a systematic and sustained exploration of these dimensions, context, variability and

example of how to read text in a performative manner is when a therapist says, "it was much better before than now" when the therapist talks about couples' ability to maintain their relationship, and I analysed this kind of utterance as doing nostalgia. Nostalgia has the effect of idealizing the past, and this effect could be read in attempts to stabilise attitudes and practices in contrast to aiming for change. Informed by a discursive approach I questioned what is at stake when speaking in nostalgic terms in a context of couple therapy. In this case, the therapists blamed the generation of 68 for having disrupted people's ability to stay together, and particularly their claims about free sex, which in turn disturb the romantic model of the nuclear family. So in this context, what nostalgia could do, is 'to do' stabilising the romantic discourse, and maintain the heteronomy ideal of a couple.

Examples of the researcher's active co-construction of the conversation

The data that forms the basis of this study were collected through open-ended, individual interviews. Such interviews permit the researcher to participate fully in a relatively informal conversational exchange. This is important because from a Discourse Analysis point of view, the whole interaction is to be analysed — not just the half of the conversation that is supplied by the interviewee. Because of this analytic focus, it is not desirable for the researcher to remain neutral or passively approving of the interviewee's contributions throughout the discussion. It has been interesting to explore my own use of language in the material as I was much more active than I thought I would be, not only in terms of volume, but in exposing meanings, delivering metaphors and in constructing images, contrasts, paradoxes and hypotheses.

In the following I will exemplify my contributions in the interviews. The first example shows how I participated with concepts and categories loaded with implicit meaning about infidelity:

A: Well, if for instance, have you've thought of the situation if your partner was unfaithful or if you were

unfaithful, would it then be ok, no problem or would it be more catastrophic, do you think?

T: Well, one has been through different phases, you know. Phases that we have worked through, but I don't

know how it will be if it happens again? It depends on different circumstances.

A: But was it catastrophic for you or you two, or was it more like; not that kind of shocking and difficult. Less

than you imagined? Or not so difficult and terrible

T: Well, the case was that we both had an affair, at the same time.

A: Well, then it was kind of equality, fair, in a way? Not just one of you...?

T: No I wonder about that, how would that have been?

A: That's different?

T: Yes... but well I have... (pause) well it happens that one of us gets fascinated by someone else. Sometimes it

comes up.... yes and then it can cause reactions.

A: It's not like that you think it's the ultimate betrayal?

When I examine this excerpt it seems to me that I construct infidelity as more difficult and emotional than the participant. My terms are exaggerations and extreme, while the therapist seems to be calmer. The terms I use correspond with a common perception of infidelity as something that impacts enormously on a relationship, in the terms "catastrophic" and "shocking", and that infidelity is something that someone does to you, harms you, seen in the notions of "inflicted" and "ultimate betrayal." By using these terms, I can be said to promote a view of infidelity from an exclusively critical perspective, taking for granted a discourse of

infidelity as harmful and destructive to a couple and as an emotional crisis for the party experiencing the infidelity. Applying notions like "catastrophic" offers little space for different associations and in this use of concepts I do not explore infidelity from the participant's point of view, but instead dramatise the situation of infidelity with my choice of words.

In retrospect, I am not sure why I actively constructed infidelity with so constrained a frame of reference, as I also draw on various discourses of infidelity. It might be that I was too informed by a dominant discourse of infidelity as something truly hurtful, and from a therapeutic position was eager to demonstrate empathy when talking about infidelity; I could also have been informed by an earlier interview with another participant who was somewhat provoked by my rational deconstruction of infidelity. The informant said to me straightforwardly that infidelity destroys a couple. I realise now that the participant might have held back alternative versions of infidelity since I was so clearly drawing on a discourse of infidelity as injurious to a couple.

Billig claims that the speaker is simultaneously in charge of language and captured in it (Billig, 1991: 8). Below is an example of my application of the notion "deep-seated", indicating a desire to really grasp the inner core of an opinion. This is particularly interesting as I subscribe ontologically to a social constructionist research model and conception of knowledge and "reject" the psychodynamic idea of identity. However, my language discloses echoes of language that I have tried to change:

A: Do you have some deep-seated - or any ideas about intimate relationships or...something about an

idea that there might be people that fit better together than others or not...? Ehh ...you're talking a lot

about emotions and feelings. You're talking a lot about feelings here. It seems like you have an idea

about feelings as something you can't just switch on and off.

Looking back, I am not sure why I, so to say, delved for a deep-seated meaning of love, but I can imagine some reasons. I might be said here to be connecting myself to the language I notice the therapist used, as the informant drew several times on an essentialist language of love. Another reason might be that I here reveal one repertoire of beliefs, namely that some beliefs are more deep-rooted, and I really wanted to get in touch with the most important idea of love, as if I had said, point blank, what is love about for you. I think that the effect on the therapist was again that I constrained the therapist's repertoire signalling that it is the one main idea that is of interest and not the complex and manifold ways of thinking about love.

The project was granted ethical approval by the Research Ethics Committee of the Tavistock and Portman NHS Trust and the Norwegian research ethics committee, The National Committee for Research Ethics in the Social Sciences and the Humanities in Oslo (Appendix 5). The participants were offered information about the study in the initial letter. This was verbally reiterated at the start of the interview to give the participants, as far as possible, a sense of protection and control. Although the formal aspects about ethical issues were dealt with I will in the following share some ethical considerations that emerged through the research process.

An important consideration at the start of the project was how the research process would affect the participants, both their interests and identities (Denscombe, 2002). However, I found that ethical dilemmas emerged throughout the research process. Anonymity issues have been important to consider. The smallness of the community of family therapists working in this context in Norway made securing anonymity difficult. I realised early in the research process that the informants told 'everybody' that they were participating, in their enthusiasm for the project. But I also realised that they and I were not attentive enough to the effects of such enthusiasm, resulting in reduction of their anonymity as informants. I thought that the more people knew about the participants, the easier it could be to trace a particular informant's voice and narratives in the written thesis.

Doing research on sensitive topics

Interviewing the therapists reminded me of the necessity of being aware of context when using such methods as in-depth interviews that have much in common with therapy and with comfortable friend-to-friend conversations. Love, sexuality and intimacy are sensitive topics; in the case of this study highly sensitive, because these issues affect both the therapists' lives and their identities as professionals. Engagement in research always has the potential to feed

back into the life experience of researcher and interviewee, with the possibility of triggering personal change (Wren, 2000). To have one's understanding of love and sexuality disturbed through answering social constructionist-oriented research questions might be both professionally and personally confusing and perhaps lead to some form of disillusionment, and this could lead to loss of power, faith and courage, thereby potentially influencing professional self-esteem.

At least for me, these feelings are recognizable, as I have been in touch with them all during the research process; also experience of these feelings in the first place prompted my interest in doing the research.

I could have been more aware of this research as possibly interfering in the therapist's life. I realise now that I should have been much more concerned about how the participants reacted in the interviews and not only acknowledged but actively encouraged the expression of their discomfort, stress and doubts when these were voiced. In my defence, I can only say that I was too preoccupied with tackling my own doubt about the deconstruction method and was probably not open enough to actively opening up for participants' doubts and discomfort.

Another ethical aspect of posing research questions to participants in the interviews is the risk of unwelcome recall of memories of unpleasant events in their lives. Infidelity, lost love, unsuccessful relationships and violence are issues the participants shared in the interviews which had significant value for me, but I did not pay enough attention to how disclosing these narratives was experienced by the participants. I do not intend to dramatise the therapists' situation, but rather recognise these reflections as ethical issues of which I could have been more aware than I was. Though none of the participants have expressed feeling discomfort in their participation, the possibility is present and I was responsible for giving such possible experiences space. The participants have reported that the experience of participation in this research has stimulated them in their work and also delivered many perspectives and reflections related to their private lives.

My findings could ultimately be viewed as a criticism of the family therapy profession and thereby of my participants in particular. An awareness of my intentions has been required, coupled with sincerity and respectful presentation during and following the research. This has been a significant challenge; I have applied a critical method, and the value of the research lies in the critical lenses it has produced; at the same time, I have an ethical responsibility to my participants in not denigrating them in any way during presentation.

To sum up; ethical issues are important to highlight and I realise most of all that the ethical dilemmas in this project are many. I have been attentive to ethical research but it has at the same time been difficult to consider all the various ethical angles, since they are not easy to map beforehand, and are not fixed. Looking back, I could have been more in dialogue with

the participants about ethical issues instead of trying to manage the ethical challenges alone during the process. When this is said, I also have a clear opinion that it has been ethically important to do this research particularly in relation to issues of professional power and its potential exertion on clients. I have also gotten in touch with my own ethical models for being a moral person, and one of them is my trust in the professional ethical conventions that identify professional self-reflection as of the utmost significance for being a professional.

# Reflexivity

During the research process, reflexivity has necessitated awareness at different levels as I encountered questions about my intentions and prejudices, how I approach them in my choice of methodology, how to write up my research and how later to report my findings to the family therapy field in Norway. Steier (1995) claims that reflexivity in research should examine how we as researchers are reflexively part of those systems we study, and reflexivity is one way we can contextually recognise the various mutual relationships in which our knowing activities are embedded (1995:163). I aim to make my research intentions, prejudices and opinions transparent and accessible for the reader. One clear intention in doing this research has been to explore in depth what is regarded or should be regarded as knowledge-in-use for the field of couple therapy. The issue raised throughout the work with respect to both methodology and analysis is, what is theory and what is 'everyday' knowledge when therapists conduct couple therapy?

My presumption was that everyday knowledge was knowledge-in-use, and would be more common than references to theoretical frameworks or research. Looking back, I have to examine why this research intention was so important to me, and how I have influenced the study through the various choices I have made. It was of interest to examine the relationship between professional knowledge and common sense in couple therapy because I am concerned with training in family therapy and have an interest in how this training programme can be improved. I was not, as far as I can see my own motives, out to prove that my hunch

was correct, but I have had an interest in the consequences my analysis would have, if accurate, for further practice and research. This is related to my research position viewing therapy as a construct and couple therapy as another construct, more akin in practice to the work of priests, philosophers, and counsellors than that of traditional psychologists working with individual disorders.

Taking this stance toward consequences even further, I could be said to have positioned myself in a professional debate (in Norway) over which professions should be represented at Family Therapy Guidance Centres, and which professions should occupy management positions I am aware that there is subdebate over the issue of which professional groups are most suitable for training family therapists as well as an even more critical conflict over which profession can manage such a centre. I am aware that this study can be used to inform arguments in the context of such professional-political discussions.

The theories of Foucault and poststructuralist thinking emphasise the roles of power and knowledge and disallow the notion of the 'innocent' helper. This stance has shaped my research intentions, and the application of discourse analysis has captured the notion of knowledge-in-use as discourses and not as theory or "common sense". The results show in part that in couple therapy, therapists draw on discourses, and discourses of love are shared in a larger cultural context than is professional knowledge like medicine. In the process of data gathering, one of the dilemmas was that the participants often disclosed private issues many of which were too private to remain part of the data, such as cases in which they asked me to turn off the tape-recorder. I think the dilemma between what was too private to disclose and what was professional enough to share, mirrors the research question. Hence my conclusion is that it is not clear what distinguishes professional talk in a more traditional therapeutic sense.

#### Circularity

One perspective important for my research interest is the possibility of change and its impact on therapists, and ultimately on clients. Rubin (Rubin in Sternberg &Barnes, 1988) claims about the impact of research that "studies of love may have their most direct effects on the individuals and couples who serve as research subjects". He refers to his 1976 research in which he found that participating in the research itself had an impact on many of the couples' relationships (Rubin & Mitchell, 1976). It cemented relationships in some cases while in others it hastened their demise. The effect of being 'forced' to look at themselves and their

relationships was experienced by subjects as similar to a kind of 'couple's counselling'.

Circularity can be seen as a loop of knowledge and change; the effect of participation in and developing familiarity with the findings of research might produce new perspectives and knowledge for the family therapy field, which again may have an outcome in providing knowledge useful for couples seeking therapy.

Related to this circularity is Rubin's claim that in research on love, played out on a larger stage, love researchers will find themselves cast as couple counsellors to society at large. The approaches and results of research on love heralded in mass media will undoubtedly shape people's expectations of love. For instance, if scientists focus on the companionate nature of love, couples will become preoccupied with their own companionship; if scientists turn their attention to passionate love, couples will be concerned with their own passion. The research may increase both the quality and the durability of intimate relationship.

Considering this perspective in a wider context, researchers and therapists hold a powerful position and they also have a direct impact on people's lives and emotional well being according to Rubin (Rubin in Sternberg & Barnes, 1988). How will the idea of love as a construction influence both therapists and couples? My aim is that research will offer polyphony and multiplicity, as well as acceptance for and promotion of a professional language that mirrors this complexity. My concern is that these findings might end up affecting the field of family therapists in ways that instead promote professional disillusionment. But for me the most dominant impact of the research is the potential to offer multiplicity and enrich views of professional knowledge in use.

## A corresponding dilemma

Flatebø (2006) quotes Kitzinger and Wilkinson (1996) in their examination of how one constructs "others", such as when clients are constructed as "others" who have problems qualitatively different from those of the professionals who for their part have the solutions to these problems. Flatebø writes, "I may be read to do the same in my report. I make my participants "others" and I then identify the problems attached to their practice and talk, whilst

I myself may be heard to be in possession of a superior view, able to suggest solutions to the problems with which they strive." This observation made me reflect on how I have positioned myself in relation to my participants.

My dilemma has been that as a practitioner at heart, I am familiar with the information the participants have shared and disclosed in the interviews - nothing has been strange or bizarre. At the same time, being acquainted with their accounts and perspectives and fully claiming my research interests in my choice of discourse analysis, I could be said to be in an obvious position of critique. This combination of "being one of them" and at the same time taking a

critical stance in research might be said to position me both as superior and as someone at a remove from her own community who can claim a meta-perspective.

The research question and the process of research

The research question unfolded throughout the investigation in a way that made me see it with

new eyes. The interviews revealed the 'blurred' divisions between personal and professional ideas and the essence of my research topic, namely the relation between theory, the therapist and the personal self of the therapist. As an example, one of my hypotheses was that the therapist in couple's therapy meets some compelling challenges. The first is lack of theory, and because there is little theory developed, therapists are to use their own ideas, beliefs and values. These ideas are connected to different and to a certain degree conflicting discourses in society integrated into the therapist's life, as well as those of the couples. To a certain extent, they are very private ideas, but in terms of therapy and other meaning-making processes we all draw on them, negotiate, repeat, define, shape, renew, play out and position ourselves towards them.

## Self-reflexivity

During the process, I have examined what my personal and professional agenda with doing this research has been. The main focus for this examination includes questions of how critical I am, and what the critique is about. I have earlier mentioned having experiences as a researcher in a field to which I am professionally committed, and wanting to combine being loyal and supportive with taking a critical stance to the field. I have tried hard to be critical enough, to pull myself into a deconstructive mood, with the instruction that it is important to investigate how knowledge is constructed and dealt with when people seek help and support for their love lives. The problem with being critical is connected to the transition from being a non-critical therapist to becoming a critical researcher, as in the role of therapist I have been

trained to understand that as a professional I must maintain an analytical and critical attitude to what has been said. The confusing part is that as a therapist I have one position, critical of the lack of reflexivity in the field, but when I experience myself doing research, I struggle with doing critique.

Although I have struggled with being critically analytic enough on the one hand, I have been aware of having reactions such as scepticism and indignation towards attitudes and opinions I interpret as conservative, stabilising, exclusive and conventional. Take as an example the

extract in which a therapist speaks, as I read it, dogmatically and negatively about the 68-generation, where I respond in the analysis by writing quite indignantly about the therapist's leaving out the positive side of this generations' contribution. I do recognise my motive in writing this thesis to trouble therapists in their potentially conservative and stabilising way of reproducing normative discourses of love, sex and intimacy.

King claims that "an understanding of the experiences not only of the participants, but also of the researchers constitutes a fundamental part of the research process" (King, 2000 quoted in Flatebø). She applies the term self-reflexivity to highlight such aspects of a research process and states that researchers, "to the extent of their ability, are required to analyse and display their history, values and assumptions, as well as their interrelationship with their participants" (ibid). As researchers are not isolated from the phenomena they study (Denscombe, 2002) I find it useful to present some thoughts, dilemmas and questions about the goals of selfreflexivity.

I am a member of the community I study, I have managed two Norwegian Family Therapy
Guidance Centres, worked as a family therapist at several others, know many of the
professionals personally and I will be involved fulltime with training individuals to become
couple therapists in addition to being an editor for the Nordic Journal of Family Therapy. All
these different employments and positions are connected to significant professional influence
and power. These experiences and knowledge have influenced the research, both in enriching
the research but also in limiting it. I have several times during this research process asked
myself, what is my research agenda? Am I interested in criticising the current practise of
couple's therapists? In order to avoid being "biased", I have attempted to identify my biases
and explore how they inform my analyses. One of the dilemmas has been how to make use of
the knowledge I think I have and at the same time to be detached from the same knowledge.
What has been helpful in achieving detachment has been the acquisition of a poststructuralist
framework because this was new and thereby involved greater difficulty in access to

methodology and theory, as well as writing in another language.

Taking the role of "stranger" was unnatural for me, but the new framework and second language made me a stranger in one sense. I have searched for methodological assistance, such as supervisors, research diary and dialogues with colleagues, to approach the research in

as trustworthy a manner as possible, to be aware of my own personal values, knowledge, experience and prejudices accumulated over several years in the profession.

Validity, reliability and trustworthiness

What are or should be consensus and sound practice regarding validation in qualitative research? Smith (Smith in Richardson, 1996) states that there is no common agreement about questions of validity in the research field. Quantitative research has conventions and standards for what should yield truth that are distinct from those for qualitative research. Qualitative research should be seen as an attempt to gain a more complex understanding of a situation by including additional or multiple viewpoints, instead of aiming to define the results of analyses as objective and universal.

Discourse analysts have also, according to Gill (2000) been critical of many existing methods for ensuring reliability and validity within psychology and need to produce new and appropriate checks for ensuring validity and reliability. Gill quotes Potter who argues that discourse analysis can make use of four reflections to weigh up the reliability and validity of analysis: deviant case analysis, participants' understanding, coherence and readers' evaluation. I have not systemically followed these considerations as a structure but find them useful as a perspective when I account for and discuss issues of reliability and validity.

First of all, I have followed Smith's advice (Smith, 2000) in making a distinction in the text between the material and the analysis. I have also aimed to present the context of the raw data

in my presentation of the analysis, as in, "this is an interview where T and I have watched a taped video session and we talk about so and so". Further, I have made efforts to include in the analysis as much of the original material as possible, to allow the reader to follow the

interpretations that I have made. Efforts taken to increase the validity of this research have been to present the material in different contexts, to allow readers to make their own evaluations of it and to actively inspire alternative readings of it. Reference groups involved here have been seminar student groups, television audiences, an audit reader, my colleagues, students and the participants, although I have not had systematic exchanges about the written material. Despite being convinced of the epistemological position of not claiming a realist position, I have still been confused about what should be regarded as insights and knowledge

worth bringing forward as "findings" and not "just arbitrary opinions and meanings". One solution to this dilemma has been reading theory and methodology and continuously adjusting and comparing my analysis with previous published research. This approach corresponds with Potter's claim of coherence and the value of checks on the adequacy of earlier studies (Potter, 1996b). It has been especially important to guard myself against the temptation of producing truths and "proofs" while at the same time disclosing why and how the insight and hindsight have continuously developed. Finally, regarding trustworthiness I can site Flatebø (2006) and Sloman (1976), who state that even if something is done only by one or a few participants its occurrence shows that it is possible and may therefore be important as a focus for further research studies.

#### Limitations of the method

"Postmodernism, in its infinitely sceptical and subversive attitude toward normative claims, institutional justice and political struggles, is certainly refreshing. Yet, it is also debilitating". (Benhabib, 1992, quoted in Gill, 1995:165)

Gill (1995) claims that there are dilemmas raised by the conceptions of subjectivity and power which underpin discourse analysis, and these dilemmas have their origins in problems in part of the understanding of relativism adopted by some discourse analysts (ibid: 165).

During the analysis one of my main concerns was that I found I elaborated themes that were relevant for the practice of therapy, such as therapists talking about their own private experiences and longings for real love, and narratives from their own professional life, which were difficult to connect to an analysis of power and knowledge. This experience corresponds with limitations of the method as described by Figueroa and López (1991 in Burman & Parker 1993). They claim that one tension approaching discourse analysis is "between the use of

conceptions of power/knowledge and a range of other approaches that are simply descriptive . In some cases, the processes of power that are being referred to in the analysis may even be explicitly referring to Foucauldian or feminist perspectives, while the actual 'analysis' does no more than redescribe what the interviewee (or other text) is saying" (ibid:8). In other words, the field of therapy exposes implicit, here-and-now, fluid themes that are descriptions of inner life, not relevant to analysis in terms of power and knowledge concepts. Another tension within discourse analysis related to this is how far the researcher can allow herself to go from context to interpretation. On the one hand, I wanted to deploy a critical view when reading my material while I experienced times when I wondered whether this was merely an

academic exercise. In other words, how to deal with relativist issues (Gill, 1995) as a researcher? I really enjoyed the freedom of discourse analysis left to the researcher, to decide what a discourse is here, how does it position the subject and how is this again related to wider aspects of symbols, signs and institutions but I also experienced being insecure in dealing with what is 'just me' and my elaborations and what is valid to claim as a research product. I found myself struggling with the tension of on the one side, being constructionist and easily slide into relativism and on the other side, realising that I during all the process of writing up, had a lot of power to define reality and taking a lot of value statements (ethic) and really in the end influence upon the final product. During the analysis, I asked myself; are my findings and how to validate my analysis? Although one could argue that discourse analysis less interested in the issue of representativeness (Gill, 2000) I think it is a shortcoming of the method, that it is not more discussion and reflections on how issues as representativeness and validity, especially for the case of psychological research could be elaborated further. A final limitation, is the question of whether subjectivity can be theorised on the basis of discourse alone (Willig, 2001: 118, Gill 1995) and in psychotherapy research this is related to a question of how we account for emotions, and how discourse analysts account for individual differences within the position for instance of being a therapist. What I find particularly relevant for further discussion is to what extent positioning is entirely context dependent and intentional, and, whether it is or not, how to account for individual choice and tendencies.

## Summary of Methodology

What has been an inspiring learning experience through the choice of methodology is the experience with discourse analysis as a different way of doing research, which provides for inconsistency in data instead of regarding this inconsistency as unexpected and problematic.

It has also been important to respond to the material in a way that corresponds with my epistemological stance, emphasising flexibility and multiplicities as the constructive drive in meaning-shaping activity when talking about love, intimacy, sex Doing this research with a

discursive approach has not been dramatically different from doing therapy, in that breaches, paradoxes and dilemmas have been responded to as equally important or, if anything, more important than patterns, coherence and representativeness of the material.

The research question I address in this analysis relates to therapists' talk about love. Couple therapists are seen as "experts on love" and I am interested in the language they use to speak about love and the implications this has for the couple seeking therapy. In addition to having an effect on the actual couple in therapy, professional talk about love also plays a constitutive societal role in social and psychological life. My analytic approach is discourse analysis because of the potential of this method to make distinct the relationship between discourse and how people think and feel and what they in fact do (Willig, 2001). A further advantage of a discursive approach lies in the opportunity to focus on how discourses change over time. The fluid and dynamic process of discourse makes it possible to consider how therapists draw on dominant discourses about love and at the same time construct alternative and counterdiscourses

in a therapy context. Finally, such an analysis can direct attention to the relationship between discourses and institutions, namely how discourses legitimate and reinforce existing social and institutional structures, and how these same structures in turn support and validate dominant discourses (Willig, 2001)

In the literature review I have identified three concepts from the literature on intimate relationships in Western culture: the couple as romantic, the couple as a unit for the nuclear family and as a pure relationship (see Chapter 3). These three prevailing concepts could serve as an organisational framework for the following analysis, guiding the selection and shaping of the data, and thereby validating the currency of these discourses in contemporary couple therapy. This could have functioned within a top-down analysis, selecting the data to fit these well-documented and critical concepts. However, when focusing on the obvious, one does not look as closely at the shadows. The potential cost of such an approach lies in overlooking discourses in the material that do not fit these prominent, acknowledged discursive trends in

the literature. Therefore, I have chosen an approach in which, while I have been informed by the discourses of romantic love, social arrangement and pure relationship, I have also kept watch for emerging marginal, sub- or counter discourses. My rationale for this choice is that while broad terms and categories function well, for example, for sociologists in their aim of charting the wide-ranging relevance of dominant ideas and perspectives, therapists have to deal with the deployment of these positions in discourse in a far more complex context: that

of a particular couple and family which represent a more manifold and inconsistent drawing on the major discourses. Therefore the outcome of this analysis will focus upon how dominant discourses about love organise, challenge, regulate and construct therapeutic talk about love.

#### The T-construct

The material for the analysis consists mainly of interviews conducted with couple therapists. I have

constructed a collective voice representing the therapists labelled T, for two reasons. One is so that the

therapists' identities cannot be recognised in the material (see Chapter 4). A second reason is that the

discursive voice comes more clearly to the fore without preoccupation with gender, age and profession. I

argue that this choice has made me more attentive to the discursive orientation in the text, freed from the

biographical details of the different therapists interviewed. However, it can be argued that there are costs

in loss of meaning and understanding by excluding biographical facts, as for instance gender; however,

these issues surface in my analysis in relation to gendered discourses. I take a poststructuralist stance in

regarding discourses as gendered to some degree independently of whether it is a man or woman who

speaks. What matters for instance is how talk is constructed in the cultural production of discourses

about gender. Therefore the construct of "T" represents the collected and collective reflections of my

group of informants, a sampling of heterogeneous therapists, varying in age and gender, social status,

and professional background. While it can be argued that these differences have relevance, all of the

therapists interviewed are white, middle class and share the professional and social status that their title

of therapist affords; in other words, the faces behind T can be said in Bourdieu's terms (1986) to carry

equal cultural capital.

The organisation of the material

A methodological challenge when analyzing the data collected during my meetings with T, involved how and when discourses about love would be identified. Talking about discourses of love with the therapists is not a simple matter, as these individuals are subject to the same discourses both as professionals and private persons. Insofar as love as a phenomenon is considered 'private' by nature, even when professional advice about it is sought, it is difficult to describe in analytic terms; this is also true of the discursivity of love. So when we talk about love, such talk constructs and is constructed by a multiplicity of emotions, signs, analogies and myths. A central challenge for me as researcher lies in the very impetus for such a discursive analysis: discourses about love are so entrenched that they are equally

unclear for me as they are for others, couples and therapists included. This raises an epistemological question of how to differentiate between dominant cultural discourses, professional discourses and those we casually refer to as 'common sense', discourses of personal experience heavily constructed by the former two.

Reading through my material, three experiential contexts emerged in which talk of love could be identified and through which discourses of love could be talked into reality. The first context is when one is overwhelmed and truly convinced that love has arrived, as in cases of being in love. The second is when insecurity arises regarding whether or not love is still present, inspiring questions about whether the relationship should continue – love in doubt. The third is when love is disturbed or threatened by infidelity: what might be called love in danger. So, discourses about love, then, emerge both in situations defined by the almost overpowering presence of love and by its apparent absence.

The analysis is organised as three chapters: Being in love, Love in doubt, and Love in danger. Each of these chapters will be briefly introduced, followed by a presentation of the analysis with excerpts taken primarily from interview sequences between the informants and me. My presentation of the material will be divided into sub-sections tracking and elaborating the various discourses, counter-discourses and sub-discourses that the analysis has yielded. At the end of each chapter, there will be an extended discussion of the analysis with a particular focus on relevance for therapeutic practice in the presentation of questions, dilemmas, paradoxes or insights for practitioner readers to explore further. A more overarching discussion of the analytic insights and implications will then follow in the subsequent Discussion chapter.

In this chapter I will focus on therapists' statements and discourses of falling and being in love. I preface the analysis with a brief overview of being in love in late modernity, and an equally condensed review of Giddens' (1992) analysis of intimacy. The analysis of the interview material will follow, organized around the central themes of 'Love as destiny' and 'The At-stake', with the various discursive features comprising these described and discussed in independent thematic sub-sections. To conclude the presentation of being in love I will discuss some of its discursive implications for late modernity on the basis of this analysis.

Introduction: The discursive function of being in love in late modernity

The phrase 'being in love' has come to refer to a state that is portrayed virtually as a natural human inevitability with the expectation that everybody will experience love at least once in his or her lifetime. Nowadays even girls and boys in primary school say 'I'm in love' as if referring to a universally accepted state, just as their parents and grandparents might do. In everyday talk one is not expected to have to explain what 'being in love' means, as the phrase has a shorthand communicative function. It is not like having a mental or physical illness, and having to explain to others the nature, implications, and prognosis of your condition; on the other hand, it is not the case that one can Google one's way to any hard facts or concrete information on being in love. Despite the lack of scientific definitions it is my impression that 'being in love' is commonly described as a natural phenomenon, with depictions ranging from the quasi-religious to those suggesting impoverishment or impairment when referring to those apparently unable to achieve the state of 'being in love', as if its absence is noteworthy or questionable. "What's wrong with that person who hasn't been in love?" we think, and discreetly discuss them amongst ourselves. Worse still is the haunting worry "What's wrong with me?" The emergence of such existential anxiety points to the power of this being in love

discourse, permeating as it does all layers of our society - from casual presence in popular literature, music, and everyday small talk, to its construction as a client's motivation to seek help in the form of personal therapy.

The terms 'being in love' and 'falling in love' are used to emphasise different nuances of a phenomenon we usually assume we know and understand, the meaning of which we all take

for granted. The challenge we face with an experience we all recognize so well consists in making explicit the implicit constructions encoded in the experience. In order to deconstruct these terms, an analysis is needed to reveal the implicit associations embedded in the language. The language we use about love reveals constructions of knowledge, such as moral and existential aspects of life, and has in turn practical implications for therapy and thereby for life and living. I will apply the term 'being in love' in this thesis to carry the connotation of a state of mind, while 'falling in love' will point to the understanding that something has happened to a person, with the connotation of a condition or event beyond the person's control, as suggested in utterances of the sort, "I can't help falling in love". When analysing the interviews in this chapter, these phrases were applied more flexibly as I alternated between the two, appealing more to the reader's intuition for the sake of analytic clarity.

A conceptual account of being in love in late modernity

Having taken a theoretical stance that conceptualises language as constitutive of experience rather than representative or reflective of experience (Willig, 1999), the next challenge consists of speaking discursively about being in love. My approach to the analysis was to pose questions about how being in love is talked about by therapists, in what contexts, and what social interpersonal objectives might be achieved through its deployment (ibid).

Being in love: a 'must' for justifying the beginning and/or end of a relationship

If we consider the repertoires people draw on when positioning themselves as being in love, we can identify the influence of this discourse on late-modern relationships in at least two ways. Firstly, it has the function of legitimating the start of an intimate relationship. The evidence and significance of the discourse reveals itself in the language people use when in love; almost without exception, they talk about how much they are in love, quantifying this and as such validating the extent of their 'in-loveness' as if in answer to an invisible if anticipated critic. In this legitimising function, the discourse also serves to organize the

listener's task, namely to trust that the person is truly in love. Possible challenges to a quantitative in-love narrative will most often be both raised and expressed with reference to language, in such remarks as, 'but you don't sound like you're in love'. To rule out any doubt as to whether one is in love or even enough in love is also essential for the couple in question, as they navigate their way towards or away from further pursuing an intimate relationship. In such terms, being in love is talked about in quantitative, scale-like terms, measured and

applied almost as a litmus test, and referred to in the end as a prerequisite for true love, itself

persuasive determinant as to whether or not one should enter into a committed relationship.

The discourse of being in love readily minimizes and overrides other potential reasons articulated for contracting a relationship, such as practical, economic, or religious motivations, as will be further discussed later in this thesis.

Secondly, the influence of being in love as legitimating entry into an intimate relationship provides at the same time a valid reason to separate; if the state of mind – 'being in love' – is said to disappear or one or both of the partners fall in love with someone else, the decision to terminate the relationship is more readily accepted. Here, then, the discourse of being in love – which includes the presence of the state and its absence or evaporation - exposes a repertoire with huge argumentative power for the couple involved. Historically, to have and to hold was the dominant discourse for intimate relationships, with marriage as the only valid model further explicitly defined by the authorized officiating agent in the marriage ceremony, be it priest, minister, rabbi, or judge. Being in love currently competes with the formerly unchallenged and even unrivalled to have and to hold. Now it is acceptable to simply point to the absence of being in love as valid grounds for terminating a relationship or, coming full circle, for entering into a new one.

Giddens: the pure and the confluent

Such a conceptual account of being in love can be supported by Giddens' analysis of intimacy in late modernity. His account of a new definition of self and of reflexivity (see Literature Review), describes a kind of relationship that has emerged during the post-war period, namely the 'pure relationship':

[The] "pure relationship [...] refers to a situation where a social relation is entered into for its own

sake, for what can be derived by each person from a sustained association with another; and which is

continued only in so far as it is thought by both parties to deliver enough satisfaction for each individual to stay within it" (Giddens 1992, p. 58).

Such a relation is pure because it is focused, established and continued only on the basis of the relationship itself, not for reasons imposed by marriage, children, or economy. A relationship is then not justified on the basis of its very existence but by reason of the pleasure and satisfaction it can provide (Giddens 1992). The ultimate premise in a pure relationship is 'we can stay together, but we don't have to, it depends on what the relationship has to offer'. This conscious openness underlying the relationship makes the individuals free to choose, but

at the same time vulnerable to being left. Giddens also introduces another concept crucial to understanding the repertoire of a discourse such as being in love, namely, confluent love, wherein love's confluence is held up in contrast to permanence.

[O]pening oneself to the other, the condition of what I shall call confluent love, is in some ways the

opposite of projective identification, even if such identifications sometimes set up a pathway to it

Confluent love is active, contingent love, and therefore jars with the "for-ever", and "one and only"

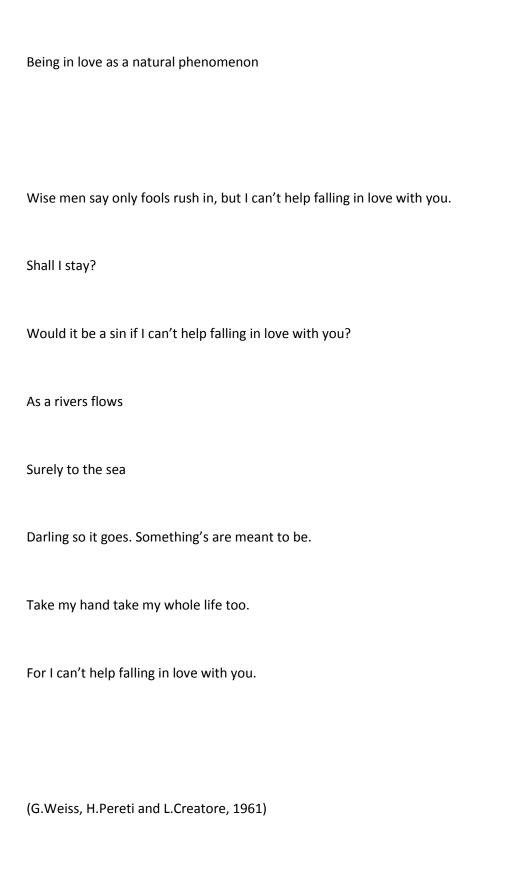
qualities of the romantic love complex. [...] Confluent love presumes equality in emotional give and

take, the more so the more any particular love tie approximates closely to the prototype of the pure

relationship" (Giddens 1992, s. 61-62).

How, then, can Giddens' concepts of pure relationships and confluent love also account for the discursive repertoire of being in love within late modernity as outlined above? In my view, the pure relationship and the confluent aspect of love as representations of intimate relationships correlate with a contemporary development I will refer to as "a call for emotional peak experiences". This development focuses on the individual's need to be entertained and to maximise fulfilmentxxvii.

Philosophically speaking, we could say that the individual orients herself relationally toward pleasure and satisfaction more than duty and virtuexxviii; in this new love trend, the couple's compass points toward frequent and rapid emotional events rather than lasting and cyclical experiences. In this light, being in love is the 'jewel in the crown' of emotional peak experiences.



#### A River Runs Through It

In this song made famous by Elvis, falling in love is constructed as an event in which the person experiencing it cannot stop him/herself from feeling the way s/he does. Three features of a falling in love discourse are mirrored in the song. First, it gives the impression of falling in love as an involuntary event. The river metaphor, "like a river flows surely to the sea", conjures associations to the irrepressible natural force of water rushing towards the ocean, suggesting the untameable forces of nature. Second, falling in love is here coupled suggestively with the power of destiny, something meant to be, that itself signals a discourse of romantic love. With romantic love and destiny as the foundation, falling in love is elsewhere further constructed as a birth process to real love, as in Alberoni (1979), who talks about falling in love as, in essence, the nascent state - or "ignition state" - of a collective movement made up exclusively of two people. This love ideal can be further conceptualised as the emergence of the romantic nuclear family in the 1950's where the woman's selfrealisation

and fulfilment were thought to come to life through her success in the marriage market, the purchase of a house in the suburbs, and the ultimate production of children to fill it. Being in love, here, is seen as an implicit guarantee for a good marriage and vice versa (Evans, 2003).

These two love metaphors - the forces of nature and the belief in destiny - construct an idea of falling in love as something that happens, an unintentional event. The third aspect of falling in love represented in this song, finally, is the unconditional readiness to give oneself up to the experience, inviting the beloved to "take my hand", and, were that not enough, "take my whole life too". These constructions make falling in love a dramatic event, with a flavour of helplessness on the one hand and strength of will on the other, the merging of which results in the promise of real love. This can't help it discourse is dominant and pervasive, floating as it

does through all layers of society, and coming to the surface in everyday speech in phrases like 'I have fallen in love' or 'I am helplessly in love'. What these statements have in common is that they mirror loss of control, both in mind and body. These speech acts position the speaker as a person in love and as a victim - of love. A potential complicating consequence of this discourse may first arise when either of the persons involved are already in one way or another committed to a relationship expected to be exclusive, monogamous or long-lasting, as discussed later in this chapter.

As for therapists, being in love is no doubt a familiar phenomenon, encountered in both their personal and professional lives. Talk of being in love in couple therapy often occurs, but I am curious about the strategic rationale behind engaging in this talk on the part of the therapist. Take for instance a question I have often asked, and observed other therapists pose as well: "Please tell me about the first time you two met. Were you very much in love back then?" This choice of emphasis on being in love invites several compelling questions. Why for instance do therapists hone in on the couple's narrative about having once been in love? What do therapists want to achieve by initiating therapy with a focus on this theme, placing it on the agenda as it were, and what is their thinking about being in love and the meaning of it in intimate relationships? By raising the theme, they seem to be setting parameters for the therapeutic dialogue and reference points for exploration of the couple's identity, whether the experience of being in love has been lost and is waiting to be retrieved, or has in fact never raised its head.

In the following I investigate whether it is possible to recognise a kind of a typically therapeutic discourse of being in love, represented in my material or if the individual therapists in the field operate out of a more arbitrary or personally constructed notion of being

in love. If the latter is indeed the case, how do these various and possibly divergent discourses adjust to and reveal themselves in different contexts?

## **Platonic Kindred Souls**

In the following interview I had not made explicit what I was interested in when I asked about the importance of being in love for a relationship. But I recognise in T's response that T both interpreted my question as one about how important being in love is as a valid reason for entering into an intimate relationship, and in turn constructed being in love as a state of mind that opens one up for a relationship:

A: Do you think of being in love as important for a relationship?

T: Yes, well, yes, it is important. I think so. Because you get a ... I think you get a... what could we call it, an entry point, direct access to people in a way. If people let it happen of course. I think people

open up their feelings. One communicates emotions that open up, kind of...you open up who you are

and your personality and I think it opens up a psychological exchange on several levels, kind of.

many levels. So I think it is a kind of entrance, kind of.

Which discourses of being in love are being played out here? First of all, I would argue that some

premises about being in love unfold in this sequence, such as the assumption that we as humans seem to

be predisposed to being a couple. T creates an image of two separate people who are searching to

become a unit, anchored in an emotional connection. Through a process of acknowledgement of each

other as emotionally open and accessible, a couple can come into being. This could be seen as a weak

mould taken from Plato, who talks about twin souls searching for each other to be reunited:

" [...] and when one of them meets the other half, the actual half of himself, the pair are lost in an

amazement of love and friendship and intimacy and one will not be out of the other's sight even for a

moment" (The Symposium, Plato)

As mentioned above, this discourse is echoed in Giddens' notion of confluent love, in his use of the same words as T about what happens when one is in love, namely "opening oneself up to" the other. It would then seem that here at this point in the interview, T subscribes to the discourse claiming the necessity of being in love as an important legitimate reason for entering into a relationship; in this vein, children, finances, and religion are outweighed by the importance of being emotionally connected. The critical premise for and essence of such relationships are defined by the quality of their emotional character. T thereby prioritizes in practice a focus on emotions even over talk of sex or eroticism as the most crucial aspect to the state of being in love, a manoeuvre in turn corresponding with a classic discursive repertoire in the construction of an either/or position towards intimate relationships, in that one has either good sex or good communication. It is however interesting to note that these notions - good communication, opening oneself up, and psychological exchange - are all imported from the language of psychology. T constructs an image here of being in love surprisingly similar in character to the traditional therapist-client relationship.

<sup>&</sup>quot;Narcissus and Freud"

Why do we fall in love – seen from a therapeutic stance? What explains the irrational appeal of desire?

In this next extract, I challenge T on the way T would account for the way people talk about being in love as a transformative state of body and mind – and how the language might resonate from a psychological point of view:

A: How can it be, in your opinion, that two people of all those possible find each other and get so

fascinated by each other that they lose sleep, appetite, and their 'head'? What is it? How can one

explain it? If I ask you as a psychologist, please explain it to me. (Laughter)

T: No, well, uhh... what is it? Well, no... I think it's sometimes lovely to see, to rest in another's gaze.

A: You think it's mostly unconscious?

T Yes, it is. But also consciously in love. People say, 'We are so alike and think alike ... and...'

I am first struck upon careful reading of the transcript by T's "No well, ehh... no well", which I in this analysis understand as part of a resistance to engage with a psychological/professional approach to being in love. This 'no' can be said to point towards a "twilight zone", representing a common language-free zone in couple therapy, a zone devoid of words. It seems as if the therapist must here move either into a more intimate sphere - the language of love — or a professional one, where the prevailing language tradition seeks, values and tries to maintain objectivity and neutrality. The therapist shows doubt here over which of these two domains s/he will locate him/herself within: the experiential and subjective one of private life, or the neutral and unambiguous one of the aware professional.

T: It is wonderful to be admired. And perhaps when it comes down to it, that's what it is you really

fall in love with.

A: A kind of projection?

T: Yes, and it can be that I see qualities in the other that I want for myself. Yes, that I get so fascinated and...and, as if I lose touch with myself.

A: So if a person becomes very self-confident and secure, would then the chance of falling in love

decrease? Because you're talking about irrational traits here.

T: Yes, that it perhaps could be more... (Laughter). Yes, perhaps.

T: ... Or one falls in love with someone because he or she resembles one of their parents. Such things... Quite unconscious.

Above, T constructs being in love as a process of being seen and admired, and hints that perhaps, when it all comes down to it, this is what being in love is all about. Such a construction connects us with associations of being in love as manifested in another discourse in our culture, namely falling in love as an illusion that has blinded the subject. This corresponds with a schema in Norwegian culture that distinguishes between and contrasts true

love with being in love, whereby the former is real and the latter only illusory. Real love connotes notions about what is real, genuine, stable, and seen with one's eyes wide open; being in love, meanwhile, carries connotations of illusion, the out-of-the-ordinary, seduction and lack of authenticity. It is the subject, moreover, who carries the burden, being constructed

as authentic in a true love discourse and as questionable or psychologically unreliable when in love.

Further, T draws attention to a narcissistic aspect whereby being in love is a form of falling in love with 'being seen'. T then reinforces the image of being in love as a narcissistic and illusory process to draw on a psychological framework, claiming that being in love is a process whereby we unconsciously seek an image of our parent - a familiar construction in attachment theory and psychodynamic language. In Norway, a couple's therapy model known as Imago-therapyxxix has been developed on the premise that we unconsciously seek a relationship that on some level echoes our unresolved relational dilemmas. This discourse feeds into a psychological repertoire, where falling in love is explained within a framework of emotional processes of attachment and self-development, with a focus on two vulnerable souls searching each other out in order to achieve therapeutic healing. Finally, the construction closely connecting therapy and being in love also manifests itself in phrases that give the impression of a subject out of control, such as "I've lost touch with who I am". Here we get an impression of the one in love as inauthentic. This focus on the unconscious as a reality informing one's choice of partner represents a break with systemic theory, with its focus on 'here-and-now' processes: how does a construction of the unconscious play a role when we talk about being in love? This is more apparent in the interview segments on being in love with someone other than your partner, as seen below.

The "At-stake"

Falling in love with someone other than your partner is what I characterize as an "at-stake" experience for some (see Introduction). What these experiences have in common, as I have understood them for research purposes, is that something is actually at stake - existentially, ethically or relationally. These situations all raise fundamental life issues or dilemmas, which, by their very reflexive and non-linear nature, are neither easy nor straightforward to resolve. Falling in love under complicated circumstances, as in cases of a prior commitment, is an

event posing just such existential, ethical and relational dilemmas. Such 'at-stake' experiences put life into relief, committing the person/s in question to look at the good, the bad and the scary in their lives; what they have, what they want, what they cannot live without - what is in fact 'at stake'. When facing such experiences, one has at some point or other to navigate one's way through an often contentious process of recognising and questioning the discursive

repertoires and positions dominating one's thinking, as well as identifying others that are also available. Such a process requires that one achieve a meta-perspective on the discursive powers that have been guiding values, choices, and life to date, in order to then be in a position to either further accept their dominance and currency, or attempt to exchange them for others that better fit the new existential challenge we face.

#### Please Do Not Disturb

In this vein, it is of particular interest for me to get a clearer picture of the different ways in which T constructs being/falling in love when reflecting upon his/her own personal experiences of having been in love with someone other than T's actual partner. What is interesting here is whether and/or to what extent the therapist's personal repertoire of available discursive positions in his/her own life might be brought to bear on similar in-love dilemmas in the therapy room.xxx

T: It can of course happen ... you fall in love and then sex is a real magnet, when you're in love.

it's impossible to talk about it at home because then there is no possibility of living it out, if you really

find it interesting. Or...if you want to just enjoy it... particularly if you have children. Or if you first

want to find out if it's something to pursue...in such cases the other person says, "The worst thing

about it is that you went behind my back, that you didn't tell me". But I think that's the nature of it all,

you just don't rush home and say that you've fallen in love.

In this quotation, T draws on a discourse of falling in love that I identify as the right to be undisturbed and private in her/his own experiences, and thereby freed from loyalty to the already-contracted couple. The repertoire such a discourse offers is to buy oneself time, to be given space to simply be in this state of mind. T emphasises two critical rights as secured

within this discursive construction, namely time to 'just enjoy it' and time to 'find out if it's something to pursue'. Such a construction makes possible a form of immunity for a while against having to deal with the complexities of the situation either practically, morally or relationally – a sort of time-out, offering space to enjoy the emotional and erotic nature of being in love, while escaping some of the challenges of revealing yourself whilst living it out. Interestingly, this discourse does not uphold the committed couple as the privileged entity to protect, but rather the individual 'hit' by love. While the original couple's form may, to all intents and purposes, remain intact, the person who has fallen in love with another becomes emotionally a single agent, alone with both the secret and the responsibility it entails.

It is not unusual, in the afterglow of an affair, to observe people evaluating their experience in terms of whether it was 'worth it'. This might happen when the infatuation ends in a destructive or painful relationship or just fades out. It is not unusual then to hear people wonder, what was it that made me fall in love with this person? This question is also a path into a more overall professional question investigated and framed as why we fall in love with those we fall in love with (Pines, 2005). As it seems in the case below, this depends on something more than the person, namely the circumstances for the event and in the end, the outcome of the infatuation.

T: Once upon a time I fell in love... after I got married. It is a long time ago now. I had a relationship

with another person. We lived at the time in a small town on the west coast. It was a Wednesday, and

my lover and I were walking along the beach. Then I saw my spouse and child driving by, with a Christmas tree on the roof of the car, and they passed us. They didn't see me, but I felt so guilty and

ugly. I had had a wonderful time with the other person, but at what price? Looking back, I could have

done without that experience....My goodness, think what I was risking for such a jerk!

T: But I have another experience with someone which I could ...we had such an incredibly good relationship...well, that one, I could have left my marriage for that one, back then... It was a very

powerful experience, one I will never regret.

The sequences above point to an objectifying construction of being in love, describing 'inloveness'

not as an experience but rather as a thing, thereby attributing to being in love its own existence and reality as an object. The only concern raised, then, regards the subject hit

by love, and how to navigate around or through it. This in-love construction, imbuing as it does being in love with an 'it'-ness, remains intact, unchallenged in its objectifying function. In the absence of such a construction, one might have reflected on love as an illusion, as seen above, or the individual as irresponsible or immature, as mentioned in the previous discussion on constructing love as an unconscious process. Rather, this objectifying in-love construction further forces critical choices to be made, where the clue is to find out whether or not the candidate is worth the risk involved.

# Consider the following:

- a) "My goodness, think what I was risking for such a jerk?" (points at the person involved)
- b) "My goodness, think what I was risking by being unfaithful!" (points at the actual action of infidelity)

The first sentence (a), as uttered by T, is a consequence of the objectifying discourse outlined above, in which the possible outcome of the 'in loveness' for the speaker is significant for

how the narrative of the person-in-love can be told afterwards. In an alternative discourse, however, where in-loveness is not given its own objective status, the subject has wider positioning alternatives, such as in example (b), which opens for personal reflections on whether being in love is indeed even an option if you are already in a committed relationship. In (b), the awareness is not directed towards the candidate involved, but solely towards the act of being unfaithful. Being in love, here, provides neither explanatory power nor grounds for acting on your feelings.

# Window Shopping

A discourse about love as a natural phenomenon plays with the person in love as a victim, helpless in love. One question which emerges when working with the analysis, is whether or not therapists talk about being in love as something one chooses, both with respect to whom and when we fall in love (Pines 2005:28):

T: Yes, well, you can become fascinated with others and in a way sort of fall in love/get infatuated,

after many years of marriage, at [business] meetings, where you are very fascinated. I'd call it fascination really, rather than being in love, to try to draw a bit of a line. And sure, of course I've

experienced that, and surely [my spouse] has too. But I don't say too much about it if I get such a....

We haven't spoken about it, and it's not like, I mean, but we've had a nice time together sometimes

and stuff ... But then I thought, "Now I draw a line, 'cause this could quickly develop into something". This will not be allowed to unfold. And there I think, [...] that some people have clear

boundaries for this kind of thing, and therefore kind of hold back. And others I imagine just let things

happen. And once in a way you can slip because just once, if... someone like... But I think I'm very

afraid of doing something to...

Here T differentiates between 'fascination' and being in love, another alternative construction with two central functions. Firstly, in choosing the word 'fascination' over being in love to describe these experiences, T disarms the phenomenon of its threatening or dangerous nature.

Secondly, within and based on this approach, T reduces 'fascination' to a commonplace occurrence with the further distinguishing implication that it is something one can choose and control. In this way, T constructs 'in-loveness' as a condition you can more or less step into, wearing it for inspiration as needed, almost like make-up or fancy clothes, but not something you have to commit to or make real. This discourse has nonetheless one important feature in common with the "was it worth it?" namely the discourse about the right to privacy. Here it is up to the person involved, the in-love or the fascinated, to take sole responsibility for how to deal with the situation in the manner appropriate for them, freed from the couple contract.

Two main questions underpin my discussion: first, what are the discursive functions of being in love in late modernity and second, how are these functions relevant to further exploration within a therapeutic context? In the analysis I have traced implicit and encoded therapeutic knowledge about being in love and how this knowledge offers various subject positions. My initial impression when analysing the material was that the therapists were unified in upholding a discourse of being in love as a must for a couple as a common point of reference. This can be seen, as in the analysis, in an often applied therapeutic method whereby therapists ask for their couples' love story with invitations such as, "Were you very much in love, back then?" In assuming that a couple's history began with falling in love, therapists at the same time feed into and uphold a discourse of being in love, with all the potential connotations of it as a seductive and illusory state of mind. I further claim that being in love is taken for granted in our culture, with nearly the ontological status of a natural phenomenon. However, being in love when it is inappropriate often bears the connotation in everyday talk of "being crazy" and, for instance in psychoanalytic terms, as an idealisation, a fantasy or an illusion (Mitchell, 2002). Therefore, being in love has multiple meanings dependent on the various communicative contexts in which it is talked about.

### When not in love anymore

One of the main and obvious discursive functions or implications of being in love as seen in the analysis is the function of legitimising entrance into an intimate relationship. Another related function of being in love is that it affords entitlement to exit a relationship, with such a statement as, I am not in love anymore. While the entrance function is almost a must in late modernity the exit function varies in degrees of legitimacy. The validity and weight of the legitimatising function of not in-love anymore depends in turn on which discourses about love one draws upon and how important themes of monogamy, will, rationality and social arrangement are emphasised, in contrast to those of emotions, romance, self-reflexivity and

destiny. Interesting from a therapeutic point of view, is that this commonly shared understanding is not entirely unified or unproblematic after all; what distinguishes the consensual from the complicated is the critical distinction of whether the person is in love with someone other than their steady partner, or with someone who is not available. So, this legitimising function for embarking on a new relationship can be perceived as a one-way

ticket only, valid only when one is free and available. The legitimacy of exiting or ending a relationship with reference to I am not in love anymore has discursive backing in two premises; (i) being in love seen as virtually a natural phenomenon and (ii) the individual's right and even obligation to live out his/her emotions. I suggest that the first premise about being in love is a folk theory of mental illness recorded in myths, poems, fiction, Hollywood, media and in the reproduction of personal narratives. The second premise is interesting to look at more closely from a therapeutic perspective since claiming the individual's right to live out emotions is not just a socio-cultural idea but also a psychological-professional one stemming from the heritage of psychoanalysis and linked now to the contemporary idea of self-scrutiny as the route to authenticity (Swidler, 2003).

The psychological premise about living out one's emotions

This premise about living out one's emotion I recognise as an inheritance from psychoanalysis and, further, from the encounter group movement of the 1960's (Rogers, 1970), and gestalt therapy traditions among others. Swidler (2003) refers to the overall process in the encounter groups movement as an emphasis on heart before head, emotions prior to thoughts. The psychological discourse about living out one's emotions in becoming a 'true and whole' person combined with being in love talked about in terms of 'a natural phenomenon' might offer a dynamic which constructs being in love as something that happens outside the individual's control, more as something that we cannot really explain but merely happens and with which one is expected to "go with the flow". The language used in therapeutic activity is often organised around correctly identifying emotions, selecting them and then discussing what to do with them. When clients state that they are helplessly in love, this could be seen as a statement of fact, but possibly also as an expression that may serve to initiate action in relation to those to whom such an utterance is addressed. Such an action could be the legitimating of uncertain entrance into an intimate relationship or justification of an exit from a committed relationship. In a therapeutic context it is interesting to question the implications of such psychological professional discourses that treat emotions as 'real' and as

something that should be lived out. One implication is the ontological one of terms labelling such internal, mental items as emotions, here termed "in-love", as something about which one can have factual knowledge and which exists in describable and concrete modes. The possible conflict inherent when working from the premise of following one's emotions in becoming an

authentic person is that this construction might conflict with another established ideal, also within the field of therapy, namely monogamy. These two cultural discourses are dominant in late modernity: the right to follow one's emotions when in love, and the ideal of monogamy. For some people the weight placed on the right to live out one's emotions is stronger than the ideal of monogamy and they then choose unfaithfulness.

The related vocabulary of accounts of therapist-client relations and accounts of being in love

Another influence of psychological discourse when talking about being in love is recognisable in my analysis as well, namely the close linguistic kinship between notions imported from a traditional language of psychotherapy and therapists' accounts of being in love. These being in love accounts are surprisingly similar in character to an ideal therapist-client relationship, emphasizing opening oneself up, trust, and good communication (Giddens: Platonic twinsouls). With the ideal of empathic communication, or "the talkative love" ("Den snakkende kjærligheten", Thagaard, 2005 ref: A Norwegian expression frequently applied in media, means communication is the glue of love) of modern relationships, one constructs emotions as natural phenomena and upholds similar ideals for beginning intimate relationships as the emphasis in good therapeutic relationships on emotional and psychological qualities: exclusiveness, privacy, understanding, and emotions. Is it sound to speak here about an implicit normative ideal upheld in the culture and by therapists: that the best and perhaps right

way to enter into a relationship is to follow one's emotions? If so, this observation makes it valid to question whether therapists may be predisposed to giving priority to being in love as the most valid reason for entering and leaving a relationship, and are less attentive to alternative discourses for entering into a relationship, such as sexual attraction, alliances, practical benefits, shared religion or merely the arbitrary occasion of coincidence. A further discussion might explore whether therapists position themselves as upholding the search for true emotions and talkative love because that is their framework of professional values and knowledge. And if this is the case, what implications does this view have for the couples in

therapy in terms of existential, moral and love-related implications? xxxi

Summary: Being in love

With an introductory section on love in late modernity and Giddens' theory of the pure and the confluent, this analysis of being in love as a therapeutic context for talk about love has yielded several interesting discursive twists. Partial discourses of love as destiny and as at

stake have served as organising principles for the analysis and address the nature and varying degrees of discursive positioning of both therapists and clients when facing existential questions surrounding the essence/nature of being in love. My conclusion is that implicit knowledge about being in love has many layers of meaning when conflicting discourses unfold, because practices within our culture are manifold. This cultural divergence, treating being in love as, on the one hand, the most natural event initiating entering an intimate relationship and, on the other, as something that may happen several times in an individual's life, calls for reflective and nuanced talk about how one positions oneself as a therapist. In this conceptual confusion, clients need guidance on how to manoeuvre within the different discourses and positions made available in our culture.

Questions and reflections for practitioners to work further with

Why do we fall in love? Answers to this question might also provide various perspectives on love.

There is a lack of explanation in systemic therapy of why we fall in love and why we fall in love with those we fall in love with. What kinds of answers are already in circulation? Are there any advantages in developing new answers? What are the implications of these different vocabularies of being in love for couple therapy practice?

The analytic focus of this chapter is on therapy sequences in which the theme of doubt has arisen, a thematic context I call love in doubt. This is set against a background of the dominant discursive weight of romantic love. The thematic context of love in doubt is seen in my material in talk and questions about what kinds of scripts about love are available when i) exploring the reasons that underpin being in a relationship, ii) facing the experience of a breach in expectations in a relationship, and iii) when going into therapy, and the expectations of what may be achieved there. In short, this chapter addresses what occurs when couples' experiences are no longer in harmony with the normative discourses in play. Of particular interest for me is what occurs when doubt creates a breach, and whether there is an opening in

the resulting discursive gap for the development of alternative, sub- or counter discourses.

The structure of this chapter is: I begin the analysis with a conceptualisation of romantic love as the dominant discourse of love in late modernity. I then continue with an analysis of four sub-discourses: i) virtuous love, ii) natural gender differences, iii) heart of hearts, and iv) the good ol'days. They might be more correctly discussed as four themes, but I see them as subdiscourses

as they have a similar moral weight and meaning to the original term "romance".

They play on the virtuous aspect of love and the achievement of home and family as the highest goal in the pursuit of being a whole person. I continue the analysis with two more subdiscourses:

v) labour of love, and vi) love hurts. These two bear the imprint of a slightly different vocabulary for love from those of the period of late modernity and postmodernism. They are different in tone from the three first-mentioned sub-discourses that are closer to the romantic myth. Gender issues and aspects of the pure relationship discourse will also be briefly outlined within these two sub-discourses.

Romantic love
Two birds within one nest:
Two hearts within one breast;
Two souls within one fair
Firm league of love and prayer.
(Greenwell 1863, quoted in Coontz, 2005)

A romantic discourse encompasses marriage, monogamy and love; invoking one invokes them all (Willig, 2001). Romantic love is expressed in the following terms: 'if you love me, you will want to marry me and remain faithful forever'. Marriage and monogamy are here necessary conditions for talk about love. As outlined in the historical overview of love in the Literature Review (p 26), the normative idea of romantic love emerged in the eighteenth century, and involves the idea that marriage is based on mutual attraction rather than on economic and practical considerations. The romantic love discourse takes much of its force from the expectation of harmony and stability, as seen in the happy and unthreatened couple/family structure, captured in the poem "Two Birds within one nest" above. Coontz (2005) claims that the emergence of romantic love in the eighteenth century was more related to the meaning of love-marriage than sexual-marriage, with a focus on 'the home' as an oasis, a source of protection for the couple and family from exterior storms. Romantic love is, further, a prelude to but also in tension with, the idea of a pure relationship (Giddens, 1992). While romantic love has its foundation in household, economy, gender differences, children and for some, moral and religious commitment, the pure relationship refers rather to a relationship based on sexual and emotional equality, embarked upon solely for its own sake and the partners' mutual satisfaction.

A possible tension within a romantic discourse lies in this very premise of love, monogamy, and happy-ever-after as necessarily inseparable. Given the statistic of the high incidence of unfaithfulness, one can ask what happens to love in marriage in the case of infidelity and/or wonder if love has faded. Couples infatuated with the prospect of living happily ever after indeed risk encountering life challenges with the potential to threaten the couple's romantic ideal. Family life cycle theory addresses common challenges couples and families might face in their process of adjustment to change, both internal and external (Carter & Goldrick, 1980). In addition to life's major transitions such as becoming a couple, giving birth, and raising children, families have to deal with sickness, pain, and stress. How couples and families meet such changes depends on family scripts, norms, expectations and dominant discourses influencing coupledom and family. Some couples split up as a way of dealing with change,

while others seek therapy for guidance and consultation; both coping alternatives stem from the discursive repertoires available. Those asking 'What do we do now?' in the therapy room, are for example implicitly trusting in therapeutic discourses guiding their expectations of how to face life crises and pain. If for instance such a couple in crises moves within and is

committed to a traditional romantic discourse emphasising the marriage promise "to have and to hold in sickness and health", they will have to adjust by widening their discursive repertoire in a way that can both support the forever-intention and accommodate their new experience of pain and doubt.

## Virtuous love

One of the research interests I had before doing this research was how a significant worldview or an overarching ideology, as for instance Christianity, influences discourses about love in couple's therapy. This question is based on the observation that many in crisis seek answers, help, support and meaning in ideology and religion. That such overarching perspectives function as anchor and compass is deeply rooted in our culture perhaps because of the formulations they provide declaring norms and rules for conduct, such as for instance, "You shall not break the marriage bond" (The Bible).

In my material, I found examples of constructions of a sub-discourse that I call virtuous love. The notion of virtue is relevant in a couple's therapy context for many reasons; first because it values spirituality and thereby permits a connection between ideological perspectives and life crises; second, because virtue is a well known and inherited concept in traditional marriage counselling as the first therapists were often priests; and, third, virtue also reflects use of a practice or a methodxxxii: being virtuous is doing virtuous acts. Virtuous love then fits well as a discourse when narrative friction is experienced, because it reconciles the discursive needs of the romantic pull, as for instance in monogamy, and the pain and doubt that can b encountered and that can challenge faith in and motivation for continuing love.

In the interviews I asked about how T as a therapist reflects on cases in which serious illness occurs and a partner must tend to or nurse the sick one:

T: You have to be in a process kind of, with this. And process demands time. And that is a lack in our

time - people don't want to live in process. They just ask for positive results, and efficiency. Oh, yes,

that's very good, there is nothing wrong with that, but I think our life would be...kind of...

richer...but now we're talking about what I believe in as a human being. That's a kind of credo, one

should work with things. Struggle, kind of...

T introduces the metaphor of St. Birgitta who "puts her clothes into the waves to get them pure and white, even more pure and white, but [who] is very concerned about not letting them

sink" and comments that "This is very nice and beautiful".

What is of most interest here is that T avoids reflecting on the possibility of there being a dilemma here, on whether there is a real choice to address regarding whether love has become

too difficult or demanding, but uses instead a religious vocabulary, referring to Saint Birgitta and the act of becoming pure to illustrate love as commitment, sacrifice, and as selfless in nature. This can be contextualised within a philosophical/religious tradition, in which the rhetoric defines virtue's relational opposite, vice, in the seven deadly sins that all play into human weakness in the face of temptations of the body, among them greed, lust and envy. This rhetoric constructs ideals according to which it is taken for granted that the vices are to be avoided and overcome, and it is only through virtue that one can resist such temptation. A discourse constructing love as a virtue, then, arises in a context in which the act of love demands an active effort and sacrifice from the partner/s.

T: I think...well some have it easier than others with their relationship, that's clear enough... but I

think to overcome all the changes in life...it's not just to understand the constitution and what people

stand for in the beginning, but you have all these changes along the way. And then it's a matter of

adjusting, isn't it? [...] We have so many demands about quality these days ...everything has to be so

fantastic, or else we don't want it... It's the post-modernistic whip, sort of... Therefore, development

through pain...and an ability to live with distance for a period while waiting, changing, bear to wait...

it's not exactly our strength nowadays.

Talk of active effort and sacrifice in a context in which one is speaking about sickness and caring for a partner I read as a subtle answer to a patriarchal biological discourse of sex in

which men need sex (Hollway1984). Sacrifice in this context is to relinquish this sexual desire for a higher good – a virtuous love. This further resembles some clients' talk of sexuality in terms of it being less important than the act of love, wherein temptation of the flesh/body is subordinated to the virtue of love – in other words, to an asexual or platonic love. In couple therapy this is often recognised in statements such as "Sex is not that important anymore in our relationship, what matters is that we love each other", "our relationship is about more than sex", or, quite simply, "love is more than sex".

In the romantic sub-discourse of virtuous love, one can see a persuasive discursive orientation wherein 1) absolute commitment in marriage is the highest achievable good; 2) pain and crises can even strengthen love when one lives by such a credo and sees the bearing of pain as a virtuous act; 3) it is not meaningful to place individual needs ("I") before the demands of the marriage ("We"), i.e. sex, career and personal interests are secondary to the commitment to the quality of endurance in marriage in times of critical change. This position makes it

possible for partners to remain committed even when sex has faded or disappeared and still frame their marriage within a context of love – perhaps even a higher love, due to the duty, sacrifice, and virtue they choose to embrace.

There is further a clear and direct echo of such sentiments in the therapeutic voice:

T: And I think deep down, you need to bear, support, adjust...So I think it is important that I as a

therapist care and support. It is important. Because those who seek therapy look at therapists as a head

above, kind of...a kind of authority... and I have faith in therapy, as a process to live by differences.

And in fact it is very useful in love, if your love is to endure.

What does this mean for the practice of couple's therapy? In a therapeutic context this subdiscourse

gives therapists the possibility to acknowledge the difficulties a couple is facing, to encourage the partners to stay together, and to uphold a romantic discourse that not only accommodates unforeseen pain but offers the potential for love to mature by virtue of its endurance.

Natural gender differences

Within a traditional and old-fashioned romantic discourse, gender differences regarding men and women's different roles were taken for granted (see Literature Review, p.) We recognize this as a theme from childhood fairytales, through teenage girls' magazines, as well as in myths, novels, films, and commercials all playing on the Hollywood ideal and illusion. It can be therapeutically fruitful in times of doubt to ask whether this theme of the scripted prince who both seduces and rescues the princess still embodies our expectations regarding gender scripts and gender differences. These expectations include an image of menxxxiii as strong and

courageous as in everyday talk about what is sexy and in the categorical distinctions women make; what is at stake is what attracts, what makes a man a best friend rather than a lover, and

where the critical difference lies in what ultimately separates 'the men from the boys'.

So, the taken for granted premise about gender differences manifests both as a romantic script for gender roles as in fairytales, narratives, movies, and novels (Swidler, 2003) and as psychological discourses about heterosexual desire which frame desire and attraction as premised on gender differences (Hollway, 1995 in Wilkinson & Kitzinger, 1995). A gender script, as in that of romantic love, offers on the one hand models and norms for how couples may work out gender issues related to love, while on the other, this script may also represent a

source of conflict, disappointment and insecurity for couples trying to fit into it.

This process of figuring out how to deal with gender scripts provides a challenge independent of whether one draws on traditional gender expectations or whether one declines a normative gendered script. Breaches of gendered expectations are played out as tensions to be negotiated

by the couple and are often a theme that couples bring to therapy.

When love in doubt is manifested in dissatisfaction with one's partner and in terms of waning feelings, it is a therapeutic challenge to understand and perhaps reframe it. In which ways do therapists talk about gender differences? In the following, I will look more closely at how a romantic love discourse offers a therapeutic repertoire for a couple where one or both partners

is/are very dissatisfied. The interview was conducted after T and I had watched a video clip of T talking to a couple and might serve as an example of T drawing on a gendered romantic sub-discourse in therapy:

T: Helpless is what I would have written in capital letters above him. He does not know how he's

supposed to do this, and doesn't know what he's doing, and he doesn't know how to satisfy this lady,

who he is, who he is involved with[...]. He feels that she will never be satisfied with him, so it becomes an interaction. And I think it won't take much to make him blossom again.

What does a therapist do with such an impression of helplessness in a man, a man who cannot "satisfy [his] lady"?

T: First, I was thinking. "Gosh - what a boring chap. I couldn't have lived with him ever". I had to

work on that emotion in the therapy... And at the same time, I felt this goodness towards him. [He is]

kind and tries as well as he can [...] I tried to put ... her ideas about him into another context so that

she could see things in another way and maybe adjust her expectations. This I think is the main project

in the first appointment, which leads to ... where I try to lift him, which leads to her at the end of the

appointment saying that she thinks he had begun to lift himself, the picture of himself, and was afraid

that I had got too good a picture of him.

T's presentation of the husband centres on the juxtaposition of his perceived boringness and his goodness. Talk about boring men is noteworthy with respect to a gendered romantic subdiscourse,

as sexual attraction is not commonly associated with boredom. T's therapeutic manoeuvre, then, is to reframe his helplessness, to enable the wife to see her husband through

a new lens: "[He is]...kind and tries as well as he can, so somehow my project is to redefine and reframe her picture of him".

Therapy here is from a discursive point of view less psychologically based and closer to socially and culturally informed cosmetic enhancement. The therapist is in effect applying make-up when attempting to render the man more attractive for the woman, an endeavour both based on and perpetuating a deep-rooted gender discourse, rather than for instance

discursively exploring her expectations, by perhaps asking "The idea that your man should in your eyes be strong – where does such an idea stem from – and how does such an idea inform your emotions and your level of satisfaction in your relationship?" Such an exercise in reframing can nonetheless be futile, if sense takes second place to sensibility. What can the therapist really achieve if T fundamentally believes, "She has really broken up with him in her heart".

T: But I have been thinking about it, a thought I had was "How much does she want this?" She wants

it on an ideological level, as in "We have two children, so we should stick together"...or wants ... as I

said, she has really broken up with him in her heart, that's something I'm sitting here wondering. And

that I possibly may challenge her on, but on this I shall be very careful.

## Heart of hearts

The above sentence "She has really broken up with him in her heart" - stemming from a discourse of love as a complete, magnificent emotion, something that fills one's heart – is an integral part of a romantic discourse. In this utterance T talks about love not in quantifiable terms, but as an all or nothing proposition. Romantic love is further associated with notions of "deep inside the heart", as T puts it, where love has less to do with liking or disliking the husband. Here T can be seen as reinforcing an either/or romantic discursive positioning: you either feel love or you don't. Staying in a marriage for practical, economic and social benefits resides, then, in a different discursive orientation than being in the marriage for "love". Of analytic interest here is to what extent a social arrangement discourse and a 'heart of hearts' romantic love discourse provide opportunities for different therapeutic stances.

T: They cooperate if they communicate or can have a more pleasant time than before when they go to

parties together and when they eat dinner together. She said, "I love him very much", she said that.

No, I don't think it can be like before. I don't think it can be complete ... and I don't know if it ever

has been complete, from her side.

This sequence, in particular the last clause, offers a Pandora's box of discursive possibilities.

Within a romantic love position, love is, as we saw earlier, objectified as a complete entity, one that is either present or not.

When it is not considered present, talk of its absence reinforces the either-or essentialist dynamic; this in turn constructs an almost mystical discourse based on the near impossibility of ever achieving true love:

T: And I've longed a lot for that real love. To be... what kids long for... and that you maybe long for

your whole life. That someone loves you just the way you are, without any make-up on and with all

your grime and everything else. And loves you maybe not just in spite of your flaws, but because of

them [...] That you can for example love a scar, and think that the scar is beautiful because you're in

love, and every imperfection is kind of part of it. Loving the guts and everything.

Such a mystical discursive positioning has by definition powerful implications when the therapist him/herself constructs a therapeutic narrative based on such an essentialist view of love as either there or not, and further places the therapist in a more knowing position with respect to the couple at hand. In the above sequence, the therapeutic glitch for T - firmly planted as T appears to be in a romantic either/or discursive position - is that liking is simply not good enough: only true, complete love will do. Viewing love as mythical in terms of something you maybe long for your whole life corresponds with what Swidler terms as movie picture love (Swidler 2003: 111).

The good ol' days

"Oh, so romantic" is an exclamation that immediately invites us into a framework of love in which roses, champagne and candlelight are natural symbols of an appealing, old-fashioned style of courtship. In the sequence below, T is contrasting contemporary couples' social

behaviour with how things were when T was young:

T: I think nowadays young people....they go out separately. They have different needs. So she goes

with her friends and he gets jealous and then he goes to a pub with his friends [...] Instead of in my

time, when they either went together or stayed at home [together]. [Going out] separately to the pub...

It's become very common. I don't think it's healthy.

In T's position as therapist, T is clearly ill at ease with the course of developments in contemporary couple's culture. T's rhetoric draws on an underlying element of nostalgia, a state of mind we can easily associate with romantic sentimentality. Nostalgia can be construed as well as a linguistic sigh, having the strategic function of a speech act in the same way as a comment like "It's God's will". Nostalgic commentary acts as a kind of silencing authority and can as such serve to effectively end a dialogue.

In holding up the nostalgic sub-discourse, T can be read as trying to stabilise the romantic discourse. From such a position, T claims more legitimacy for criticizing what T experiences as the dissolution of norms and the resulting disturbance of the traditional nuclear family model. T's criticism comes with a scapegoat attached:

T: You know, those kids of the '68 generation, they're like, I don't know if I should say this but...well they have no boundaries, and behave very permissively... this sounds old-fashioned but the

spectrum of diagnoses changes, and now one can see that selfishness and a bit of, kind of borderline

[diagnosis] is increasing.... Parents... you see... are going out, drinking, having fun... So it's this thought, "Well I don't have the right feeling for him anymore, so..." But you can't just leave? Yes, I

can...you see? I think this phenomenon occurs more nowadays than before.

All the words T attributes to this group are negatively laden, as in "selfishness" and "borderline" emphasised further through the concept of "diagnoses" and work in this analysis as a positioning that stabilises the romantic discourse by pointing at the threat of other types of life forms, represented by the influence of 'the 68 generation' - such as more equality between the genders, sexual liberation and new ways of living out intimacy, as seen in greater tolerance for and inclusive attitudes towards new family constellations such as gay unions and single parents.

I have so far in this chapter addressed the dominant discourse of romantic love, as well as the emergence of conciliatory sub-discourses which all have in common that they are closer to the original concept of the term romance. I will continue to analyse sub-discourses within the overall dominant romantic discourse, but these sub-discourses embody a slightly different vocabulary of love than the romantic myth derived from the period of late modernism and postmodernism. In the analysis I label these sub-discourses labour of love and love hurts.

Gender issues and aspects of the pure relationship discourse will be outlined within these two

sub-discourses.

Labour of love

What happens with the idea of love when the roses wilt, the champagne goes flat, and the candles burn down? Friction commonly surfaces at some point in a relationship. From a therapeutic standpoint, it is interesting to consider various accounts of couples' friction, quarrelling and struggle as such narratives inform therapists' repertoires of action or intervention. The literature about love offers various categories of love (see p. 12). Swidler

(2003), in one example, differentiates a mythic and a prosaic-realism view as virtual opposites. She refers to her research where, in prosaic- realist terms, love is talked about as something that grows slowly, where one can love many people in many ways, where love that leads to marriage depends on compatibility and on practical traits, and where, finally, love does not last forever (Swidler, 2003: 114). In my material I recognized this vocabulary as indicating the construction of love as something that requires hard work, compromise and the will to adjust and change. This view of love is also recognisable as love as social arrangement wherein the overarching vocabulary can be placed within an economic discourse of love (Willig, 2001) with love as a project and the couple as partners who invest, the costs and risks evaluated continually.

In the extract below, T accounts for why many couples struggle by pointing to the conflicts of interest between 'I and We':

T: Both of them need their own stuff. Especially those interests they don't necessarily share (as glue).

... the woman, it could be the man also, but usually the one party, most often the woman is more

oriented toward relational things, and wants this relationship to work And the day she feels that the

two of them share, and that this we-relationship has got what it needs then suddenly it is much more

acceptable for him to do his thing. So it has to do with timing. First comes 'the we', and when...I (as a

therapist) feel that when one in a couple is seen and acknowledged, and they feel that we have

something in common, then I (as a therapist) say to the man, 'Now you can go play football or whatever you want'.

Here, T's rhetoric is underscored by a sub-text pointing to traditional gender roles wherein masculinity is characterized by independence: the man wants to be free from domestic and

relational issues and to do his own thing. T's therapeutic position confirms this male script, but at the same time introduces a competing sub-discourse promoting fellowship and relational intimacy before indulging the 'I'. T's confidence and competence in this emotional work arena also chimes with the typical female script in issues of emotional labour and is an interesting observation in terms of discourses of therapy and gender. This is similar to a feminist account of gender differences claiming that women are supposed to do the romantic work and men supposed to do sex (Wetherell, 1995 in Wilkinson & Kitzinger, 1995).

Further, talk of the couple's potential conflict of interest can be associated with a framework viewing human beings as first and foremost utilitarian happiness-maximising individuals. xxxivOne therapeutic repertoire is to make the couple aware of this conflict of interest and to strategically help them adjust and negotiate. T implicitly talks about intimate relationships as social arrangements within an economic discourse (Willig, 2001) whereby benefits can only

be enjoyed if and when one solves the potential conflict of interest. Such challenges revolving around I/We interests can be associated with the idea of love as hard work. As Kipnis (2003) phrases it, "the labour of love" resonates in T's vocabulary when demonstrating how important it is to do the task of emotional work before enjoying the privileges of leisure time. T is drawing on the well-established distinction between hard work and leisure time established during the industrial revolution. When facing love in doubt, real love is constructed within a discourse about hard work and investment, here manifested as a belief in psychological work and in growth as involving understanding and adjustment.

T: I believe in psychological growth and development and psychological work. I believe, indeed,

there is no easy, fast way to get a relationship to work. If so I think one has been very lucky...I think...well, some have it easier than others with their relationship, that is clear enough...but I think to

overcome all changes in life...it's not just about understanding ... what people stand for in the beginning, but you have all these changes along the way. And then it's a matter of adjusting, isn't it?

As a metaphor of this I think of a picture of living pieces of a puzzle that change all the time, that you

can match, fit into or not. But it is hard work...

The conception here of love as emotional labour suggests a compelling paradox, one challenging our general understanding of both emotions and labour, and based on an intuitive tension between these concepts. We usually think of emotions as 'natural', something that you cannot dictate, decide or regulate; the idea of labour in the realm of love disturbs the romantic ideal of feeling right. What T achieves with such a discursive orientation is a therapeutic stance that makes effort in communication worth the effort, and offers a different repertoire to

play with than is available in a mystical, essentialist love discourse. In short, faith in therapy makes it meaningful to work on love so that it can endure.

T: Take for instance a traditional man-woman issue, like...uh it creates a lot of frustrations. So I think

that to communicate about these difficulties helps us to be better. And I think it's, deep down, you

need to bear, support, adjust...So I think it is important that I as a therapist care and support. It is

important. Because those who seek therapy look at the therapist as a head above, kind of...a kind of

authority... and I have faith in therapy, as a process to live with differences. And in fact it is very

useful in love, if your love is to last.

Pure relationship and therapeutic evaluations of love

So far in this chapter, I have addressed discourses in which the enduring relationship is both an ideal and a central axis of therapeutic orientation but enduring love discourses do not however draw a complete picture of the discursive orientations revealed in my material.

Tension manifests around the therapists' subjectivity - wanting for example to not be seen as old-fashioned or conventional - and their discursive positioning whereby they simultaneously engage strategies to maintain couple stability. I nonetheless see traces of late-modernistic discourses, such as for instance Giddens' pure relationship (Giddens 1992), emphasising that a good relationship is one between equals, where each party has equal rights and obligations. When informed by a pure relationship discourse, a couple's continuity is not taken for granted and assessment then becomes an important element in the relationship's development.

Going to therapy is one way to uphold such an evaluative intention within a relationship through therapy's reflexive process.

T: I am really quick and clear when I am faced with a relationship that doesn't work. My colleagues

say about me, 'If you go to [T], you'll be divorced by the middle of the session.' I'm more active and

very clear in my message: 'Try to explain to me why you two should live together, because It's difficult for me to understand. For me it seems like the two of you are exhausting each other. I can't

see the glue, so please tell me why...what is it that ties you two together?' I am very direct on this.

What, then, serve as viable criteria for evaluating whether a relationship is delivering sufficient satisfaction? And how decisive is the therapist's influence in this process? I find it interesting how T expresses T's view on such questions by legitimating T's positioning by the sentence; 'When I see a relationship that ...', a statement that enables T to adopt an expert observer position. Such a positioning towards relationships plays on a diagnostic discourse in speaking as if a relationship 'that doesn't work' is a category unto itself. Such diagnostic perceptions can interfere with an appreciation of the complexity of both individual relational

narratives and the cultural context informing such a therapeutic stance. In this extract, T's references to the ideal that a relationship should give satisfaction and pleasure clearly corresponds with the nature of the pure relationship, wherein satisfaction is essential and the "I" is set before the "We". Expectations of pleasure and joy as the glue in a relationship contrast sharply with the more dysfunctional behaviour highlighted in statements such as 'You two are exhausting each other" - in other words, "this is not healthy". So T's meeting with a couple that seems to be 'exhausting each other' does not fit with the idea of mutual satisfaction, prompting T to ask for an explanation. The sentence 'Tell me why the two of you are together?' chimes with a pure relationship discourse, wherein participation is voluntary and the 'glue' validating the relationship is found in the couple's own evaluation of satisfaction, emotional support and communication.

The sequence cited was in response to the question of when is it legitimate to reflect and comment on a relationship's quality. As quality is a relative term, it can be determined or evaluated in other terms than simply degrees of satisfaction. If one were to read T's challenges to the couple as rooted in a construction of a relationship as a mutually beneficial social arrangement, it could be argued that there is in addition to the presence of a pure relationship discourse in these sequences, resonance with an economic discourse, appealing to notions of investment of resources in return for long-term security. In such a view, it is a pity and a waste to not invest properly. The therapist's questions could finally be seen as advice given with an economic discursive spin, as if to say, 'If you two do this to each other, you are not investing your resources properly. It is pointless to exhaust each other because then you don't fulfil the aim of a long-term relationship'.

## Yes, but Love Hurts

idea that therapists rely on the different discourses outlined in the literature review. I was also looking for alternative influences with particular impact for therapists or informing therapeutic practice as implicit constructions that have an impact but are not articulated to the same extent as discourses that are common and easily recognizable, as for instance the romantic. The role of subjectivity must also be accounted for when exploring the sources of inspiration and motivation for therapists and the therapeutic drive; it is on this level that images and intuitions – what I like to call pre-discursive spinal cord knowledge – plays out, although some might see it is as highly discursive. I therefore asked in the interviews for personal inspiration found in poems, music, novels, and other non-professional sources and accounts accessible in the public sphere.

When reading my material I was concerned with finding text extracts that underpinned the

One of the poems T referred to was the song Love Hurts.xxxv "Love hurts" has also become a common saying, often employed as a ready concluding comment after hearing about someone's troubled relationship. What are the implicit discourses underpinning references to the pain of love? How does such a construction influence therapists' ways of doing therapy? One aspect of love here is couched in terms of what a heart needs to be able to endure, expressed in this text as the need to endure pain. In other words, love costs - or, in a more contemporary turn of phrase, love is a "high-risk sport".xxxvi This fits with post- and late

modernism's construction of love as represented by a passion/pain trend in novels (Prozac Nation), music (Gray: Still)xxxvii, and movies (Wild at Heart, Betty Blue), all of which, in different ways present love as an emotional cocktail of despair, pain, fear, attraction, and lust possibly in response to the idyllic romantic love ideals of harmony, male protection and purity. So where romantic love upholds gender roles, expectations of reproduction and child care (see Literature Review), this 'love hurts' image is characterized by individual peak experiences and the breaking of boundaries in the pursuit of powerful emotional experiences. This image of love carrying expectations of pain commonly produces multiple references to individuals as lonely, desperately seeking passion, often accompanied by substance abuse. The experience of love may well be closer to that of addiction – with all the associations therein from ecstasy to death. Another aspect of a pain-informed love can be more concretely understood from a therapeutic perspective. I have heard clients talk ambivalently about domestic violence, about the emotional pain caused by threats, harassment, bullying, cheating and unyielding patterns of cruel communication. Sometimes therapists hear from clients, "Yes, but it's real love, and real love hurts". Such declarations can at times be difficult to understand; they seem easier to grasp in terms of mythical thinking – the stronger the pain, deeper the love must be. The myth lies in the conception that the more we sacrifice and withstand and tolerate, the more we prove the love. This has resonance in religious traditions and rituals.

Finally, one can see a common rationale in love hurts and virtuous love. Both discourses present pain as part of love and neither emphasise the value of working to achieve a pain-free relationship. However, while virtuous love holds up virtue(s) - seeking the Middle Way, nobility, and self-sacrificing love - the love hurts discourse searches for a selfless love through experiencing what a philosophy of virtue paradoxically deems capital sins – or, in a modern turn of phrase, "sex, drugs, and rock and roll" - and where love resides in the

experience of meeting temptation head-on.

## Discussion of love in doubt

In this chapter I have focused my analysis on what occurs in the face of doubt when a couple and/or therapist lean/s on a romantic discourse. Virtuous love is a central organizing theme, under which natural gender differences, essentialist heart of hearts talk, and nostalgia have all been discussed as discursive manoeuvres when facing love in doubt. Labour of love and love

hurts further offer an array of discursive positions prominent in late modernity when the romantic love ideal meets narrative friction after the love story credits have rolled off the screen. The aim for the presentation of the analysis of love in doubt was to reveal some of the taken for granted, implicit constructions and ideals about love in couple therapy contexts. This analysis looked closely at how therapists' discourses about love become more distinct and accessible when the ideals of love are challenged or in doubt, as is the case within couple therapy context. My analysis, in sum, demonstrates therapists' responses, paradoxes and attempts to negotiate, disturb and persevere with the discourses that emerge when faced with love in doubt.

My aim for this discussion is to summarise the discursive subject positions available to therapists, and the possible dilemmas, paradoxes and challenges inherent in these therapeutic responses. One of the main questions for me in the analysis was to elaborate how therapists talk about romantic love when "romantic" is challenged by unromantic events. The romantic myth permeates the Norwegian culture in a way that influences therapists in seeing it as a natural and ideologically preferable foundation for marriage and long term relationships. At the same time, discourses other than romance are available as rationales for choice of partner, for instance in arranged marriages. Various kinds of rationales emphasise key words such as "religious", "practical", "economic", "suitable" and "accidental" reasons. These discourses challenge the romantic one, but how unprejudiced are therapists when they encounter these alternative discourses? Is it the case for example, that romantic love as a foundation for marriage among young immigrants is almost a litmus test for successful integration? Or do therapists wrinkle their therapeutic noses when couples offer such in-love narratives as; "well it just happens to be us, I don't know why, but in-love, no"?

In my work with this chapter, I am struck by how present the romantic discourse is when therapists talk about love. The presence is not explicit, as in statements such as I believe truly in romantic love, but I recognize its occurrence in a dynamic in which a romantic love discourse organises therapeutic talk about love, upholding the discursive functions of

romantic love - seen, for example, in nostalgic talk about the 'good ol' days'. I interpret such attempts as activities aimed at stabilising discourses of love, particularly in therapy, because in a therapeutic context these discourses are in tension with some more challenging discourses

about how to live love in one's life. An example of this is when monogamy competes with the individual's right to "follow her/his own path through life".

The stabilising effect of virtuous love

In the analysis I argued that virtuous love might be seen as a solution to narrative friction, as when couples experience sickness and the need for permanent care. The solution lies in the potential for preserving the promise of "to have and to hold, in sickness and health" within a frame in which one could argue that one upheld the marriage promise of duty before love. What makes this position possible is the combination of three organising premises in this discourse - namely: commitment to marriage, the belief that pain and crises faced in the relationship can strengthen love, and the "We before I" - that together offer a conceptual frame within which the couple can reorient themselves when experiences of pain challenge their harmony. Virtuous love has a function justifying the continuation of a relationship during crises and combines it with a romantic reference: I do it for love, only. This is an interesting position seen from a therapeutic stance; hence this position also sits well with some significant couple therapy traditions. One of the first professions conducting couple therapy was that of priests, and the aim originally was to support couples to stay within their marriage, with the institutional backing of the Church in claiming the ideal of monogamy. Within a therapeutic context then, this association of Church, virtue and priests makes virtuous love a strong and vital discourse applied in couple therapy. A challenge however is that this discourse might silence alternative discourses for managing pain in love which, as mentioned earlier, emphasise the individual's right to choose to leave a relationship when faced with unexpected and demanding changes - similar to the argument that the individual has a responsibility to follow his/her own needs over the needs of the couple, in terms of you are only responsible for your own life. Sickness and the need for permanent care might, within this discourse, be too challenging for the survival of love. From a virtuous love perspective, such a stance might be seen as selfish and utilitarian.

A final reflection then: when talking about virtuous love, one of the premises for contracting a long-term relationship, as seen in the chapter 'Being in Love', is the report of sexual and emotional attraction (Giddens, 1992). How does one navigate when one finds that what was the initial premise for contracting the relationship has gone, and one does not feel confident with the discourse of virtuous love, but still wants to give an account of oneself as a

responsible and respectable person with integrity? Do we in late modernity operate with mutually exclusive discourses that position actors as either selfish or virtuous?

The stabilising effect of romantic love on gender categories

Romantic discourse is almost always gendered (Willig 1995:133), with two complementary subject positions made available: the male hero who has agency, and the female heroine or princess who relies on her prince to save her from whatever fate has done to her (Brownstein, 1984). How romance is gendered can be seen from different perspectives; for example, Pines debates the different approaches to gender differences and attraction within social constructionist theory and evolutionary theory (Pines 2005:122). In the subsequent discussion I take a social constructionist stance, seeing gender differences as constructions with discursive functions.

A traditional romantic gendered discourse is debated and challenged by both feminism and queer theory. The persistence of romantic discourse and the emergence of new practices represent cultural discursive tensions, and links with fundamental themes in couple therapy, such as how gender expectations should inform the allocation of domestic work, and how to deal with unclear gendered scripts regarding identity, attraction and sexuality. What is the role and mandate for therapists according to the gendered discourses faced in therapy? Should therapists work on the same level as gender scripts suggest and help couples to adjust their behaviour, expectations and perception to fit discourses, or should they in some way move to a level beyond adjustment and challenge gender scripts in themselves? One of the examples in the analysis illustrates how persistent the romantic myth is when it comes to gender and attraction (see page 112). Even more fascinating is the way this aspect of the analysis shows how an implicit construction about gender difference mobilizes a therapist to work in a stabilizing way in 'adjusting' the couple to reframe themselves within a romantic gendered script. From a feminist stance one can ask if therapists in some way are actively reproducing gender inequalities when helping clients to adjust to gender expectations, or when offering

popular gender insights as truths. In other words, if people are unhappy and dissatisfied with their lives because of discourses carrying expectations of how gender roles and differences are to be understood, should therapy then assist couples to adjust to these expectation and attitudes, or should therapists move to a discursive level, exploring the meaning of the different discourses?

An even more critical thought: if the democratisation of love and intimacy is taken for granted as Giddens suggests, might one overlook gendered power in general and abuse and violence in particular? Evans (2003: 125) quotes Langford, a feminist writer, on this point: "Acting habitually upon the basis of unconscious fantasies, the lover reconstructs their ego defences, reconstitutes their gender identities and reproduces dynamics of domination and submission." How are such structural inequalities in the relations between genders considered in couple therapy? Is it the case that the ideology of love and romance is so taken for granted that therapists become blind to this point of view when working with couples?

The romantic discourse and same-sex relationship

An important ingredient in the romantic discourse is gender differences; how then are romantic discourse practices and expectations for how same-sex couples want to live love influenced? And one can ask how the romantic discourse influences same-sex couples and vice versa. Since gender differences are an important issue for the heterosexual couple, it is interesting to look at how romantic love may have hegemony in such a way that it also affects same-sex couples. One way in which we can see that the romantic discourse functions as a norm that influences same-sex couples is in the passing of the Civil Partnerships Act in Norway in 1993, and by an increasing tendency for same-sex couples to have children within a somewhat stereotypical middle class heterosexual model - what in Norway is referred to as the Volvo-woof-woof (dog)-townhouse family - the ultimate nuclear family practice.

In Norway legal and political strategies enabling same-sex couples to marry and to adopt children are progressing rapidly (Arnøy and Hansen, 2008). There is the recognisable application of traditional family terminology among my same-sex coupled friends (both lesbian and gay) who refer to their partners as "my wife", "my husband" or "my family" more frequently than do my married heterosexual friends, instead of inventing new and alternative

terms for intimate relationships.

On the other hand, lesbians and gay men are forging new paths for heterosexuals as well as xxxviiifor themselves (Giddens, 1992). Take for instance the subcultural practice within some of the gay communities in which sexual relationships are framed within an ethic of friendshi and the practice of shared and open non-monogamy is not seen as problematic, or as a sign of

a troubled relationship but rather as preferable: "one finds this practice among heterosexual couples as in for instance 'polyamory', loosely translated as 'many loves'." (Anapol, 1997).

We might claim then that there is a tendency towards the de-centring of hetero-relations, both

socially and at the level of the individual. The heterosexual couple, and particularly the married, co-resident heterosexual couple with children cannot be taken for granted as the only basic unit in Western society (Roseneil, 2007). Research on the tendency toward heteronorms being influenced and challenged by other practices of intimacy than that of the traditional romantic couple has been labelled "queering of the family" (Stacey,1996 in Roseneil, 2007). Meanings of ,family' are undergoing radical challenge as more kinship groups must come to terms with the diverse sexual practices and living arrangements chosen by their own family members (Roseneil, 2007). Stacey (in Roseneil, 2007) suggests that there can now be few families which do not include at least some members who diverge from traditional, normative hetero-relational practice, whether as divorcees, unmarried mothers and

fathers, lesbians, gay men, or bisexuals.

There are many approaches to the issue of romantic discourse and same-sex couples. One approach is to look at how same-sex couples are in a situation marginal to the heteronorm, and at equal rights for same sex couples to do the romantic script fully. Another perspective for further research is to look at how new practices of intimacy such as those expressed by same-sex couples among others, in fact influence and perform queering the heteronormative romantic script.

The stabilizing implications of a mystical essentialist discourse in therapy

In the analysis I identify a mythical-essentialist sub-discourse which indicates that it is possible to think of love as 'real' and this real love to be further objectified in terms of

whether it 'exists' or not: she loves me or she loves me not. In addition to a search for real love, the language hints at real love as something that has an existence inside the body, with the use of such words as "heart", "soul" and the feelings of love "deep inside". In this discussion I ask what the implications are of such essentialist talk of love, in two different contexts, namely when i) the therapist as a professional says: I don't think love exists in this relationship and ii) when the therapist speaking as a private person says I have love deep in my heart. It is not unlikely that a therapist uses the same vocabulary about a client's relationship and her/his own relationship, but the connotations might be quite different when

talking about love in objectifying terms within a professional context. The discursive functions of an essentialist framework of love might work rather like a diagnostic language, offering an observer position and giving the impression that a professional has privileged access to information about the person's 'inner' state. The dilemma raised is not whether as a private person the therapist uses essentialist talk about romantic love, but if such talk, because of its taken for granted status, frames various love scripts as either right or wrong, and love as something that is either there or not.

Implications of terming love as hard work

When working with the excerpt in which T applied terms from the sphere of work, such as "investment", "hard work" and "commitment", I question whether such talk refers to love or not. I claim that it does, and this talk is even possible to locate within a romantic love discourse, because of its references to falling in love as a way in to intimate relationship and its emphasis on choices made by independent actors, on emotions as reasons, and on the goal of monogamy. The difference from mythical-essentialist talk about love appears when narrative friction emerges in a relationship and the vocabulary then slides into an appeal for commitment and hard work to sustain the social arrangement and the couples' alliance. A discursive function of love as labour corresponds with another important premise in therapy, namely faith in couples' abilities to manage their relational challenges.

What I find exciting is a discursive shift from mystic-essentialist love talk accepting and expecting the emotions-based way in to a relationship, to a 'prosaic realism' vocabulary (Swidler 2003) referring to love as hard work; the first emphasises emotions while the second draws on rationality. This shift reveals topics for further exploration, namely what is the relation between emotions, thought and narratives of love? Is it possible within a romantic vocabulary to work to achieve romantic emotions when people report them as weak or absent? In couple therapy this becomes a particularly complicated and knotty issue when the couple diverge in their talk about the importance of emotions, where the one who reports the

presence of such emotions wants to persuade the other to work hard and continue in the relationship. Therapists might in such cases find themselves actively engaged with the couple's dilemma: should the one in doubt be encouraged to put work into the relationship, or should the one who argues for continuity be told that emotions are difficult to work at once they are gone? A strong belief in emotional work might put the therapist in an ethical

predicament: is it right to implicitly support one of the partners into persuading the other to stay and to work? Taking the stance that language is never a neutral bearer of unified meaning one can wonder what alternative meanings about a relationship a therapist is bringing when importing terms from an economic worldview, such as "negotiation", "balanced accounts", "conflicts of interest" and "work-ethic"?

Kipnis (2003) criticises this love as labour constellation and argues against it in the phrase "Are you never ever off the clock?" and claims that the message is that even in your intimate relationship, you have to work harder on yourself.

Love or its absence is seen in the analysis as an acceptable motive for individual action, and,

Satisfaction as a criterion for a relationship to endure

to quote Evans, "we take it as a form of socially sanctioned and accepted individual entitlement that the presence or absence of love legitimates the establishment or the ending of a personal relationship" (Evans 2003: 6). It is easy to recognise this legitimate function of love but at the same time, a question that is important for further consideration arises: with various discourses of love available, what should then be the criteria for ending or continuing a relationship when one is in doubt? In the analysis, I give an example in which T declares a professional stance, a legitimate right to be quite direct towards a couple when T perceives that a relationship (in T's view) is not good enough to continue: tell me why you two are together? This legitimate right to be direct and to confront corresponds well with the premise of the pure relationship (Giddens 1992) that a relationship should deliver enough mutual satisfaction and pleasure if it is to be worth sustaining.

Pain and satisfaction

The ideal of the pure relationship might be seen as a desire and a longing for the phase of

being in love to extend, a golden phase of satisfaction and pleasure - in the same way as a notion of 'labour' carries implicit meaning in terms of satisfaction and self-development.

These terms suggest a criterion of subjective experiences of satisfaction detectable through introspection, and that such satisfaction is unstable and insecure as the 'glue' for securing endurance of a relationship. Another issue is what position a therapist takes when he/she suggests breaking up a relationship if the couple is not satisfying each other. Taking this "satisfaction" criterion further and pairing it with images of pain in love, one gets a powerful

but subtle postmodern, cultural and psychological mix expressed in the sub-discourse of pain and satisfaction, yes, but love hurts. In this sub-discourse I perceive a crossroads, where pulpfiction

xxxix meets the psychological credo of "emotions make you real" with the last sentimental traces of romantic love, in a never –give- up-attitude: love will find a way. Such a construction of love situates therapists in different ways from fascination to recognition to a refusal of the whole construct with the clear statement pain has nothing to do with love. A therapeutic ethic however should question how this construction positions therapists with respect to pain, abuse, power misuse and physical and emotional violence. What do therapists think about pain and love, hate and love, abuse and love?

Summary: Love in Doubt

The analysis of love in doubt reveals many dilemmas inherent in the romantic discourse seen from a therapeutic stance. The overarching dilemma, as I see it, is a discursive tension in late modernism between ideals of monogamy and the conflicting ideal of an individual's right and responsibility to look after his/her own wellbeing. Secondly, the analysis reveals a linguistic dilemma: the vocabulary of love in essentialist-mystical terms is strongly divergent from talk of love as hard work. When should one use what kind of language? Should there be consistency or is it acceptable to be inconsistent? Thirdly, as feminism has pointed out, gender issues are potentially problematic within the reproduction of a romantic discourse (Evans, 2003; Swidler, 2003). When one takes for granted an essentialist explanation of gender differences this has further consequences for the available repertoire of gender roles, gendered power and the performance of gender, attraction and sex.

Questions for practitioners to work further with

Why do we position ourselves in the romantic discourse? Power issues and the persistence of romantic love, seen from a therapeutic perspective, need further explanation, allowing for

exploration of gender topics, sexual orientation, class, ethnicity and the questioning of a Bourdieuian reading of habitus (Bourdieu, 1986). Is it possible that being romantic is a privileged position and holds a kind of status for some socio-cultural groups, at the same time functioning as a non-dominant frame of reference for other couples? Being romantic is not necessary for love, as this analysis has shown; love could be something other – something more or less - than romantic. For the field of couple therapy one might rethink the impact that being romantic has on a couple in terms of expectations, contradictions and paradoxes.

Chapter 8: LOVE IN DANGER

In this final chapter on love I will address the love in danger discourse, specifically as

manifested in talk of infidelity. After an initial deconstruction of the term 'infidelity', I will

give a brief account of Foucault's work on the history of sexuality, and then proceed to track

the discourses I identify in my interviews with T in much the same fashion as I have in the

previous two chapters. My research focus this time is on T's reflections on infidelity, with the

analysis centring primarily on moralistic, psychological and gender discourses, as well as the

emergence of counter-discourses, and some reflections on when it is considered acceptable

for

a therapist to give advice.

Introduction: Infidelity

Infidelity is a common challenge for which couples often seek therapy and counselling.xl

Many couples encounter infidelity and talk about this experience as a crisis often followed by

emotions of shock, grief, anger and mistrust. A quite common reaction for couples when

infidelity surfaces, is to question their relational status, a response based on a conception of

infidelity as the ultimate betrayal. This stance is one that has wide support not just in the

particular couple in question; friends, family, colleagues - and, in high profile cases, the

media - are all readily engaged in the task of offering moral support to the one betrayed,

through statements such as, "You shouldn't put up with this", and "How could he/she do this

to you?". In drawing on an overarching discourse in our society about the necessity for

couples' exclusivity, Princess Diana could be said to have both brought to the fore and put a

face to such assumptions in her famous sentence, "There were three of us in this marriage, so

it was a bit crowded".xli

At the same time, while we exchange veiled glances and hush-hush comments when somebody we know has 'someone on the side', according to well-known statistics presented in researchxlii and the media on the incidence of infidelity, this phenomenon is nonetheless not entirely condemned or considered an act one should try to avoid. Moreover, as the practice of infidelity certainly persists, alternative discourses to the solely moralistic one must necessarily

infidelity certainly persists, alternative discourses to the solely moralistic one must necessarily also be in play. There is indeed a simultaneous process occurring that challenges a purely moralistic stance, and even clears space to offer emotional and moral support to the person who 'has something going on', often expressed in terms such as: "You deserve it - you need

to carry on with this affair. I have never seen you so happy". It may perhaps seem incongruous that it is yet again friends, family members, and colleagues, who hear, see, deduce and play a more or less complicit role in and facilitate these stories, providing support in the form of an alibi, an ear, or an extra bed, as needed. The term "deconstruction" was made known by the philosopher Derrida (Derrida, 1966)xliii and is used in social science to denote a philosophy of meaning that deals with the ways that meaning is constructed and understood through the interplay of authors, texts and readers. The praxis of deconstruction then involves analysing by 'un-doing' concepts to discover and recognise the underlying and implicit meaning of a phenomenon or discussion. Given the view that it is language itself and the practice of language that construct our reality, it follows that what we conceive of as problems and how we choose to solve these problems also stems from languagexliv. In other words, within such a perspective, problems are both created and maintained in language when it is used in an unreflective manner. The task according to Derrida and social constructionism is to deconstruct or "undo" a concept saturated with implicit and explicit meaning with the aim of gaining new meaning and knowledge. In the following I will deconstruct the notion of infidelity after having first defined the term.

Infidelity "occurs when a person who is married or in a long-term relationship has sex with another person" (Collins co-build lexicon, 09.11.06). According to this definition, two criteria are necessary for infidelity to be claimed: i) the existence of a pre-defined sexually exclusive relationship, wherein ii) at least one of the partners has sex with another person. Taking this definition at face value, infidelity is strictly defined as sexual intercourse, though at the same time many clients speak of emotional infidelity – defined for our purposes as falling in love and forming an emotional attachmentxly - as equally threatening and emotionally disturbing as

a sexual encounter. I will in this chapter address both emotional and sexual infidelity.

Looking at these definitions of infidelity, we can trace a common thread connecting them, in the form of already implicit and taken-for-granted values and norms built into the very term infidelity itself. Such meaning surfaces when prefixing the larger notion of 'fidelity', one that carries a higher status in language and in life than its counterpart and nemesis, infidelity.

Purely linguistically, 'fidelity' is recognized as occupying the moral high ground, an honorable concept in contrast to infidelity's immoral, shady character. Technically, the term is understood in common language as the act of being sexually unfaithful, a non-preferable

action bearing the further implication that sexual unfaithfulness is negative to a relationship. Taking this at face value, it can be argued that by using the term infidelity in an automatic, conventional, or unreflective manner, one can be said to position oneself within a moral context; in such a moral context, fidelity serves to further uphold the ideal of monogamy, thereby compromising an analytic approach to the phenomenon of extra-relational encounters.

For the aim of the analysis at hand, the terms to be used in the following discursive analysis will be as follows: when a source in my material uses the term "infidelity", I will cite it as such and in the vein in which it is intended, namely as indicating acts of non-fidelity, be they emotional or physicalxlvi. However, in order to maintain a deconstructionist stance toward the linguistic phenomenon at hand, I will i) apply the term "extra-relational encounter" when I take a meta-position to the different discourses about unfaithfulness as they manifest in everyday language, and ii) apply "in/fidelity"xlvii, when I want to emphasise the explicit, associated connotations inherent in everyday use of the term, such as betrayal, immorality, threat to a relationship, among others.

Foucault: The history of sexuality, and 'scientia sexualis'

It is interesting to recognise to what extent and in which ways both emotional and sexual in/fidelity contribute to the construction of therapeutic discourses in therapy and in so doing, create a context wherein sexuality itself is deemed an issue worthy of counselling and therapy. It has neither historically nor culturally been common practice to seek therapy for sexual matters (though in England sex therapy – often behavioural - is quite well established), nor is it even a given today that all couples would welcome professional help with issues of such a private nature. One possible historical and cultural context in which to understand how sexual matters may nonetheless be regarded as an issue for therapy can be drawn from Michel Foucault's analysis and archaeology of knowledge.

In The History of Sexuality (1976/1981), Foucault understands sexuality as a discursive formation that arises epistemologically and through history. According to Foucault, we have in Western Europe developed knowledge about sex through our various ways of talking about it, which have in turn and over time constructed our episteme about sexuality (ibid). Sexuality has as such gradually come to be regarded as a body of knowledge and has thereby further contributed to the development of the professions such as psychiatry, psychology, and medicine. Specifically, according to Foucault, sexuality has been constructed as knowledge

through the ritual of confession - in particular, confession as practised within the traditions of psychoanalysis and the Catholic Church. He claims that throughout the 17th century there was an imperative to confess and perhaps a paradoxical insistence on talking about sexuality (ibid). Confession is seen as tied to an imperative to find out 'the truth' – which again is a truth begging to be confessed. Foucault writes:

"We have since become an extraordinarily confessing society. Confession has spread its effects far

and wide: in the judicial system, in medicine, in pedagogy, in familial relations, in amorous relationships, in everyday life and in the most solemn rituals; crimes are confessed, sins are confessed,

thoughts and desires are confessed, one's past and one's dreams are confessed, one's childhood is

confessed; one's diseases and problems are confessed..."(ibid: 59)xlviii.

Psychoanalysis is a powerful episteme for sexuality, representing in essence a scientific version of the Catholic confession. By constructing human emotional problems as representative of repressed sexuality and positing the analyst as supreme interpreter of sexuality, sexuality itself is in this process effectively further constructed as hidden, difficult, dangerous and a matter requiring treatment. With this practice of confessing hidden sexuality, prescriptions were developed of how to tame it, further creating an episteme of self-discipline wherein sexuality's sanctioned role is solely reserved to matters of reproduction. Last but far from least, the psychoanalytic tradition postulated what was to be considered unnatural sexuality, and constructed what was to be understood as normative sexual behaviour.

Women's bodies became sexualised in their role as bearers of children. Children had to be protected against masturbation, and all forms of perversion, including homosexuality were dangerous and indicative of the need for treatment.

Another essential influence on our notions of sexuality is found in the power of confession as practised in the Catholic Church. According to Foucault, the Catholic Church's emphasis on

confessional activity sends the message that sexuality has a fixed nature that we must repress or tame; as sexuality is further talked into existence by defining it as essentially problematic, the paradoxical situation is created whereby it is through the specific and unique practice of confession that one can be redeemed. The dynamic of confession is manifested in sentences such as "I have sinned and had sexual fantasises" or "I have sinned and committed sinful acts", whereupon the priest responds by encouraging as detailed and concrete a narrative as possible. Every detail is to be laid forth in confession every trace of pleasure experienced is to be examined in the name and shadow of sin. Foucault's analysis with specific reference to the

Church and psychoanalysis has relevance for couple therapy contexts. I see the confessional and psychoanalysis as forerunners of the self-reflexivity of contemporary therapy.

Tracking the discourses

My linguistic deconstruction of in/fidelity above points to a single dominant discourse about extra-relational encounters, namely that in/fidelity is a betrayal within and of a relationship — given the simple fact that in/fidelity stands in a linguistic relation to fidelity and that we intuitively rank fidelity higher than in/fidelity. However, if this is the case alone, therapy would then logically be reduced to a simple matter of negotiating between the offender and the injured party. The very fact that in/fidelity is a matter to bring to couple therapy, as opposed for instance to a courtroom, carries an expectation that there may be more at stake, that therapy should and will reveal something more than the "either/or". With this in mind, it is particularly interesting to investigate what kinds of discourses are in use when therapists talk about in/fidelity in order to then focus on how these different discourses offer an array of subject positions to take up. I will also look more closely at how these discourses interact, and whether there is any kind of specific dynamic between or hierarchy organising them.

The data for the following analysis comes from an interview with T in which we are discussing a taped therapy session with a man who is seeing T because his wife is in love with another man. The theme in the video sequence is the man's concern about his wife, as the client asks the therapist for advice about how to handle this situation. He also questions whether she can be held accountable regarding the children. T is talking in our interview about how T is working in the therapy to help the man distinguish between using the children as a power strategy against his wife, and acting in the children's ultimate best interest, and it is in this context that the following discourses have been traced.

A moralistic discourse – the high merit of faithfulness

An implicit reference to a moralistic discourse can be seen when T's client asks the therapist whether his wife's in/fidelity ought to have some consequences. The very fact that he asks his therapist - here held up as an expert and a representative of institutionalized knowledge - can be seen as an example of a moralistic discourse negotiated to the surface. Specifically, the consequences he looks for can be read in a moralistic context as a plea for sanctions.

Further, having made no reference to the persuasiveness or even the presence of this discourse

in our interview together, T then intuitively turns to this discourse by commenting to me as interviewer:

T: He shouldn't feel that he has a moral right to the children. I think about this client, with his moral

indignation, I think he's right in feeling it, but he can't take it out on his children. I think the client is

saying to his wife, 'You can't just come here when it suits you, after all you've done'. It's like, 'The

children are a bit more mine now than yours'. He's talking about his anger.

Both T and the client, then, talk in the session within this moralistic discourse and from a shared acceptance of its potential implications, whereby if one is unfaithful one stands to be judged, and risks further possible consequences including loss of home, name, and children. A moralistic discourse offers a subject position for both men and women as highly socialised moral actors. A construction of in/fidelity as an immoral act, then, positions the client in these sequences in at least three ways: i) as having the right, by virtue of being the designated victim, to seek support in his attempt to be understood and tell his story, ii) as a responsible person wanting and trying to save his marriage, and iii) as a more responsible person than his wife at the present time.

Such a moralistic discourse on in/fidelity is widely recognised in the Norwegian protestant culture, with which our initial encounter lies in early childhood religious lessons, drilled into us through the powerful words of the Bible's 6th and 10th Commandments: "Thou shall not break the marriage vow" and "Thou shall not covet thy neighbour's wife", further reproduced and more potently sexualized into a discourse in the Catholic Church's confession ritual as mentioned above. However, although this discourse has been dominant since the Middle Ages, the brand of 'moralistic' is not necessarily desirable in contemporary society. T

explicitly expresses this attitude in one of the interviews:

T: Well what I like to think about myself is (laughter) that I'm flexible and open. That I'm openminded

about... that I'm not old-fashioned".

This use of the term "old-fashioned" suggests not being open-minded and in step with the times and the importance of not being moralistic with respect to sex and intimacy. And yet, as a culture we are unclear here: the unambiguousness of previous centuries' values is not wholly dismissed. Hence we can see an ambiguity surfacing in this moralistic discourse. The collision of previous ideals, such as the moralistic stance against in/fidelity, shapes new practices that in turn 'legitimate' in/fidelity and thereby makes it unacceptable to be moralistic. This impact results in flaws, fractures and breaches through which new meaning

is brought forth. Such tension and ambivalence – between and about old ideals and new practices - breeds paradoxes, resulting arguably in the paradoxical spirit of modern times, whereby in our discursive ambivalence we both judge and condone in/fidelity.

Psychological discourse – "Not bad, but mad"

When engaged in an extra-relational affair, many describe themselves as caught in a net of desire, lies, absent-mindedness, and teetering on the edge of the law as they take risks of which they never before believed themselves capable, all in order to be with the beloved other. It is not unusual to be perceived by others as 'not being oneself', an observation carrying the serious implication of in/fidelity as a breach of the person's very self. A psychological discourse about in/fidelity emerges when having an extra-relational affair is connected with questions of mental accountability. Such a psychological discourse manifests in both public and private descriptions of not being accountable. In the private sphere, unaccountability has many colours and connotations. I recall an incident that made a lasting impact on my sense of the discursive catch-22 that can arise in situations of in/fidelity in an episode with some friends. They rang me and said that there was a crisis, and could I come over for an hour and help them with an acute situation. The man had just discovered that his wife was being unfaithful. This man said he wanted to leave the house immediately and that he wanted to take their baby with him. He was packing and left the house five hours after the in/fidelity was revealed. It was as if by this action he was saying to his wife, "Now I understand all the changes in your attitude and behaviour these past weeks, why you've been absent-minded. I can't trust you and I want to protect our baby from your unreliability". As an observer to this episode, I wondered whether this woman thought that perhaps her husband was in fact acting less mentally accountable than her, but perhaps she was not in any position to claim this because the discourse he was drawing on was too powerful.

This discourse of unreliability on the basis of having had an affair relies on a normative view and justifies the husband's indignation and perceived right to take the baby as far away from

the wife as possible. He holds the joker, as it were, and has a leg up on her, despite his state and because of her actions. Being mentally unaccountable in the eyes of an observer gives the observer both the responsibility and power to take matters in hand.

T talks further in the interview with me about the client's worries over his wife's mental state:

T: In the last session, the one I had with the man and woman together, he tried out a hypothesis about

her being in a mid-life crisis or even psychotic. He had discussed the possibility of her being mentally

unstable with their friends and he experienced support for this hypothesis of her being mentally

unaccountable for the time being.

When the client construes his wife as being in a mid-life crisis, he applies a psychological framework to question whether or not she is mentally accountable, a manoeuvre with potentially powerful effects. In this particular therapy sequence, then, talk of possible consequences regarding collaboration around the children points in fact to the construction of a psychological discourse wherein the wife is not to be held accountable - she is, after all, 'not herself'- a state prompting the husband to ask for full responsibility and sole custody of the children. By bringing it into the context of family therapy, accountability is treated as belonging in the public domain, a matter of legitimate public concern within a legal paradigm. In Norway, for instance, there is a legalised and legitimised link between the perception of someone's mental instability and society's declared responsibility to investigate and evaluate that individual's ability to care for children. I understand this discursive connection as an example of how anchored the psychological framework is as a motivation for personal action.

Echoed discourse about gender and motherhood

This psychological discourse is closely related to, enhanced by, and in turn contributes to a further discourse, albeit vaguer and less central, that I label 'echoed gendered discourse' about motherhood. In the above sequence, one finds an example of how an echoed gendered

discourse is activated, in the husband's concerns about his wife's accountability and particularly in her relation to their children.

As I read it this constitutes a very subtle shift to the opening of a historical discourse which constructs women first and foremost as mothers and wives, and in which women's sexuality is tied to their roles as wives; sex outside this frame is to be regarded dangerous and dirty and opposed to the ideal of female purity, affection and loyalty within the frame of marriage. This discourse positions the man and the woman differently vis a vis sex and in/fidelity. This view is also represented in a traditional account of in/fidelity, which has historically held up men as being more naturally predisposed to unfaithfulness than women (Willott and Griffin, 1997). This discourse emphasizes the biological forces compelling men to seek a mistress commonly

referred to as male-driven sexuality (Hollway, 1984). Traditional perspectives on gender and gender roles are moreover rooted in an essentialist assumption about natural gender differencesxlix (Gross & Simmons, 2002): a man, in essence, is supposed to be strong and protective while a woman should be gentle and virtuous.

The term 'echoed discourse' came to me almost like an actual voice, like an echo. When I read the section on the husband questioning his wife's accountability, I recognised that the associations it raised for me about women, sex, infidelity and motherhood created a resonance

with discourses belonging to earlier times but still with contemporary currency. An echoed discourse about women, motherhood and infidelity is more like a layer of positional residue, an echo of traditional beliefs we are reluctant to voice in modern times, as if political correctness has silenced the voice of what is nonetheless a clearly present discourse. In other words, echoed discourses are traces of constructions and predispositions that we do not talk about in public, but that still inform what can be said and done. How, then, does this traditional view of gender roles connect to a discourse evoking questions of motherhood, accountability and in/fidelity? Is it that fathers can leave their families if in love with someone else, while if a mother voluntarily leaves her children for the sake of another partner she is perceived as a greater betrayer and therefore more blameworthy? When women and in/fidelity

are discussed from this historical perspective, the positioning appears to be either/or: women are either sexual beings, representing temptation, or they are virtuous, giving birth to and caring for children in more of a Madonna spirit - specifically not as sexual beings but as a pure, caring gestalt. This premise becomes more distinct when these two positions become intertwined, as when a woman expresses her sexuality at the same time as she claims to want to care for her children, and - to make matters worse - in a context outside the original nuclear family.

I raise this issue on the basis of a hypothesis that we as therapists are vulnerable to these

possible discursive gender tensions. Are we, when it comes down to it, more ready to look morally askance when it is a mother rather than a father who gets involved with a new partner? Is there even a connection between such emotional repertoires and a tenacious if covert impression that we put more trust in mothers and motherhood than we do in fathers when it comes to parenting?

## Discourse and counter-discourse

In response to moralistic and psychological discourses surrounding in/fidelity, various counterdiscourses

can be identified. While it is conceivable to read the hope in a moralistic and psychological

discourse that the long established couple will endure, there are other discourses challenging such

agendas. The permissive discourse, for example (Hollway, 1984), challenges the moralistic discourse

that takes the survival of marriage as the prime objective. In such a permissive discourse, the principle

of monogamy itself is challenged, as it is considered the right of both men and women to express their

sexuality in any way they choose. In assuming that sexuality is natural and not to be repressed, the

permissive discourse is closely allied with the male sex drive discourse, differing only – if significantly -

in that it applies the same assumptions to both men and women (ibid).

In the following I will account for a discursive dynamic that overrides both moralistic and permissive

discourses about in/fidelity and diverts attention to rhetoric that suggests a quite different rhetorical

position for therapists, and points at what is at stake when taking up a stance towards in/fidelity.

## Hearts trump

T says in the extract below that T does not want the husband to feel any moral right to the children, so the first premise is that being in love with someone other than your partner should

not have any consequences for parenting.

T: I don't want him to feel that he has a moral right to the children only because she has fallen in love

with another man. Because it's very hard for her, it's not....she's not that kind of woman, one of those

who fool around....she's on a wave, she can't stop it.

Second, T then goes on in the same extract to counter a one-dimensional narrative of the wife by emphasising that "she's not that kind of woman, one of those who fool around" and on the video I saw, goes as far as to tell the client directly that T does not support his image of his wife as irresponsible or unaccountable at this time. In T's challenge to the client's dominant description of the wife's unworthiness, T in effect fragments the overriding moralistic discourse. In defending the wife, T introduces the notion that you may have an extra-marital relationship and at the same time be a trustworthy parent if you are a "serious person" as opposed to "that kind of woman".

Looked at more closely, T's talk about in/fidelity gives being serious in wanting a new relationship a higher discursive status than the moralistic discourse. What might be the case here is that if the wife was in fact someone who did just 'fool around' T's perspective on the man's situation would perhaps be different. But because she, in T's eyes, is a responsible woman - meaning she is serious about this new man - T's utterance serves to implicitly communicate that being 'serious' in an extra-marital relationship can in one fell swoop release you from the consequences of judgement by situating you within a new and more forgiving discourse, namely the romantic. Here, then, falling in love and having an extramarital relationship are redeemable acts if connected to intentions of having embarked on a new, steady relationship. As seen in being in love (see 102), the overriding significance of the betrayer's seriousness - of character as well as in the new relationship - serves to portray this woman as having been hit by love, making her and others in such circumstances passively and discursively redeemed. A narrative about falling in love then supersedes a narrative of in/fidelity, overriding, as it were, the otherwise often pervasive moralistic discourse.

Separate parental and couple issues

T is not simply presenting decisive arguments against the discourses this client draws on, but rather is introducing a kind of process, one that can be seen as a therapeutic intervention to uphold the need to keep separate parental and couple issues - a positioning that in itself draws on a late modernistic discourse re-situating the family as a unit that can manifest in various forms, and wherein parenthood and marital status are no longer necessarily one and the same.

In T's role as family therapist, then, the challenge lies not least in clearing a path for this discursive shift, a priority T acknowledges and holds up when encouraging the parties at odds not to entangle the two central themes of parenting and coupledom when tackling marital challenges.

T: ... I am very pleased as a therapist, when people say, as clearly as this man says in this session, at

least, that one should separate these levels. I am very against adults punishing each other with the

children.

Historically speaking, such a discourse is a relatively new construction, as I see it, brought forth by the interplay of at least three primary factors. The effects of i) the rapid increase in the number of divorces, coupled with ii) the new terms and entitlements of childhoodl, finally merge with iii) the romantic emergence of coupledom as an unchallenged entity that can exist independently of the tasks of production and reproduction, resulting in the legitimisation of

new practices. It is in this vortex that new discourses are created. Children, parents and coupledom are then made into separate familial entities, as this discourse makes room for an acceptance of the redistribution of family life - a new centre of gravity for the family form as it were - thereby establishing the grounds for parenting and coupledom to be sifted and separated.

Constructing advice-giving as acceptable and unacceptable

The focus thus far in this chapter has been primarily on the way discourses are constructed and hierarchically organised around in/fidelity. We have also seen how a dynamic emerges between the discursive forces at play: a moralistic discourse is challenged by a permissive one but with reservations, as the romantic discourse of love trumps both the moralistic and permissive attitudes towards in/fidelity. While analysing the interview material, I recognised another noteworthy dynamic surfacing when T talks about whether or not, and when, to give advice. Giving advice in systemic couple therapy is not necessarily seen as the proper thing to do, the rationale for this being that people should rather be in a position to draw upon their own resources to find their path in life. In systemic literature this is expressed as "clients being experts on their own life", and is recognised in systemic terms as a "not-knowing position" (Anderson and Goolishian, 1992). These notions among others serve to underline a paradigmatic distinction between a systemic therapeutic ideal and the expert-oriented professionalized attitude found in traditional psychotherapy. And yet, systemic therapists do offer advice to their clients. The participants in the interviews conducted for this research, as heard in the collective therapeutic voice embodied in the T-construct, talk about situations where they advised or positioned themselves in order to legitimise giving direct guidance regarding their clients' lives. The therapists explained when and why they consider it important to give advice in an effort to make manifest that there are in fact some situations in which advising clients is meaningful, and others where it would not be deemed effective or functional. This dilemma of whether or not to offer advice was raised with regard to sexuality and - in particular - to situations in which things do not work out as expected.

## Dead relationships

The following is a sequence in which T gives a rationale for when to give what kind of advice related to questions of sex, in/fidelity and monogamy. The background for these excerpts is an

interview in which T and I had been looking at a video-clip of a couple's therapy session. T's first reaction to the video-cut is to declare:

T: This is a dead relationship ...Her way of nagging at him – makes him dead, [and...] she's so cold –

well, eh... they're both rigid.

T follows up the word "dead" with other words suggestive of a post-mortem metaphor such as "cold" and "rigid". What kinds of premises are drawn on when speaking about dead relationships? I might begin to answer such a question by transposing metaphors of death, rigidity and coldness to their opposite pole, images of life, vitality and warmth with all the sexual and sensual connections inherent therein. Moreover, the presence of a vital sexuality is implicit in our culture in the qualities that define a good relationship. Clients seek therapy because their sexual relationship is experienced as dead, boring or conflicted. I asked T how therapists then account for the fact that sexuality, once so vital in the phase of falling in love, can subsequently become so difficult. T did not answer my question explicitly or directly, but rather provided an explanation for why people stop having sex in terms of a bad habit — a bad habit you can reshape into a good one.

T: Well... I think sometimes you end up getting into a bad habit of not having sex... perhaps after the

birth of a child or something like that... and they struggle ...um...so I think... natural...I suggest...
now the two of you have had a break and then I say to the couple, "You have to start again.
Yes just

try it... just put some effort into it".

This explanation for the absence of sex translated into "people getting into a bad habit" provides a rationale that by definition makes it acceptable for T to give advice; a bad habit, one might argue, calls for advice in order to work it into a good one. The interesting question here is how to explain the fact that T legitimates giving advice in such cases. Returning to

being in love (Chapter ), the state of in-loveness was emphasised as a necessary late modernist premise for entering into an intimate relationship. Given such a premise, which may further be immediately and implicitly associated with sexual attraction and involvement, one might ask how essential it is that sexual activity endures in an intimate relationship. The answer to this is of course neither clear-cut nor easy. When couples come to a Family Therapy Guidance Centre, sexual problems are often presented with a kind of despair behind the words "we don't have sex any more — we're like siblings" or "s/he doesn't want to have sex with me any more". Does the pressure many therapists feel when presented with issues experienced by couples as overwhelming organise them in such a way as to leave them feeling obliged to offer some particular advice or intervention?

Looking more closely at the discourse T taps into, it seems the overarching idea is that an intimate relationship is expected to be a sexual one; moreover, sexuality is one important criterion defining such a relationship. When sexual interaction is absent, the very essence of being a couple can be in jeopardy with the couple's identity as intimate at stake. Is this, then, a legitimate situation for giving advice? If so, what is the rationale behind doing so in such a case? One possible answer is that T leans on a belief about sexuality as critical for a relationship to thrive, and is aiming to save the couple from a possible break-up by giving them a push in the right direction. In so doing, T is positioning advice-giving as acceptable if the underlying intention is to prevent either a break-up or sexual in/fidelity from occurring. In a 'To have and to hold' discourse (Hollway, 1984) such a contextual justification for giving advice makes sense. Alternatively, one might interpret T's comments as pointing to a more therapeutic manoeuvre. More specifically, from the perspective of the practice of conducting therapy, the therapist considers the absence of sex a bad habit that can be changed, that the couple needs to "just put some effort into it", whereby T can help them by using T's authority as a so-called expert to be in a position to say, "Just do it"li. Of further interest within this stance is how one interprets what is characterised as a sexual problem in a relationship: how for example does 'having sex' and 'not having sex' relate to therapeutic principles about couple therapy and to a wider discourse about sexuality and its role, function and meaning in long-term relationships?

## Drawing the line

As seen in the above sections, therapists do give advice and I am further interested in whether therapists would articulate any limit regarding the kind of advice that could be offered. Given the idea that sex is on the one hand the glue in a relationship, while a lack thereof is on the other a reason for leaving, I was curious whether it would it be possible for T to give advice in terms of other less conventional arrangements or mutual agreements to meet the partners'

respective need for sex.

A: But do you have any limits about the kind of advice you might give? For example, if they do not

have sex for some reason...and one wants sex...do you give any advice? Or do you suggest for instance taking a mistress or lover?

T: No, I don't.

A: No?

T: ...I don't think it is healthy for a relationship... Generally... I don't give advice... No I don't give

advice... Well, it might happen that the couple finds it appropriate...it's ok...but if one of them is

reluctant...but no... One has to draw a limit somewhere...

In this sequence T claims there is indeed a limit to what kind of advice might be given. My question was intended to mirror what I consider a relevant dilemma for many couples: on one level they want to stay together, but on another they also want themselves or their partner to live out their sexuality even if it does not occur within the relationship. T rejects the idea of supporting the solution I sketched in my question. The reason T will not give such advice to a couple, namely to encourage them to think of alternative practices such as taking a lover, is "I don't think it is healthy for a relationship". By emphasising "healthy", T positions T-self as an expert on what is in fact healthy for a relationship, while not accounting for what would be unhealthy or why. As T does not refer to T-self as drawing on a particular psychological theory, I wonder whether T here speaks from a more moralistic position, of infidelity as both a sin and destructive, rather than foremost positioning T-self in this context as a professional whose aim is to facilitate the particular couple's own helping strategies. Drawing on the "healthy" relationship presents a strong metaphor that suggests purity, a powerful counterpole

to the so-called "dead relationship".

Here it seems that T uses the discourses actively with the aim of protecting a boundary, or to protect monogamy in relationships. As T says, "One has to draw a limit somewhere". What then is the difference between acceptable advice and unacceptable advice as constructed by T? As both instances of advice-giving regard sex, it appears to be acceptable for T to advise

couples to limit their sexual activity to within the framework of a steady relationship, and conversely to be unacceptable to advise a couple to seek sexual stimulation outside such a framework. Advising a couple to separate sexuality from their relationship creates a breach with the very idea of what a relationship is and should be: love and sexuality seem to be paired in the ideal of a healthy relationship. This, finally, has further relevance for the acceptability of in/fidelity when occurring within the context of being in love, as opposed to its unacceptability when motivated by a basic need for sex.

The aim of this analysis has been to investigate talk of in/fidelity within a landscape where contemporary discourses about in/fidelity are double-edged, ambiguous and contestable. I will raise some questions important to highlight against the background of the analysis and that as both a researcher and a therapist I regard as particularly relevant for therapeutic work with in/fidelity issues.

Talk about in/fidelity within a couple therapy context

A dominant discourse about in/fidelity has been that in/fidelity is wrong and immoral; this view was enshrined in the Norwegian legal system, as in/fidelity was a legal reason for divorce until 1991lii. This monistic cultural discourse has informed earlier couple therapy traditions as well, with the consequence that the therapist's professional and private selves were congruent and the therapeutic aim was clear with the ideal of the maintenance of marriage.

In late modernity, I have claimed, practices have emerged that dispute monogamy; alternative discourses are available other than that of condemnation of in/fidelity. Taking this into consideration, new professional challenges must be dealt with in the field of couple therapy. At the same time talk about in/fidelity is still loaded with tension. The term "in/fidelity", as I have pointed out in the section Deconstruction of in/fidelity (see p 131) in an already fixed linguistic relation to the term "fidelity". So my argument is that while practices of in/fidelity are not new - they are perhaps as old as the institutional ideal of monogamy - nevertheless for couple therapy the potentially wide range of attitudes which in/fidelity evokes is a relatively recent occurrence. In the analysis I found that the discursive struggle, dynamic and hierarchical, mirrors the therapist's stance towards in/fidelity to a greater extent than does the fact that they draw on particular and identifiable discourses. How then do these discursive dynamics influence the therapist in couple therapy work when themes of in/fidelity are present? My subsequent discussion comprises questions and dilemmas that represent my

findings better than fixed claims and statements. One hypothesis for further consideration is that issues of in/fidelity dispose therapists to be drawn more easily into questions of what is right and what is wrong, because of the historical notion of in/fidelity as a moral issue. What happens to the methods, interventions and aims of the therapeutic dialogue during this discursive transformation?

What are the differences in the therapeutic process when we shift from viewing in/fidelity in couple therapy as a moral theme to approaching it as a professional theme?

The professional I and the personal I

Another but related question is whether therapists report any discrepancy between their professional "self" and their private "self" and whether they talk about these as being in conflict; if so, how should these conflicts be negotiated? For example: in the interviews with the therapists I recognised that some of them took a therapeutic position towards in/fidelity that made me wonder whether working as a therapist positions one to take a more openminded

perspective on in/fidelity than one might in the private sphere. Does one's professional footing impose a more permissive stance than the individual behind the professional title would otherwise have drawn on? If this is the case, one way of understanding it is that therapists speak within a context or debate where it is not appropriate to be regarded or perceived as moralistic. The opposite of being moralistic in this context is to be tolerant, open-minded and flexible. But there is a potential tension here: one of the therapists said clearly that she/he would not tolerate in/fidelity in his/her own partnership, but

in therapy she/he took a very tolerant stance to in/fidelity and this was a clear professional attitude. A thoughtful question is whether one should as a therapist give credence to the position of being a facilitator in the issue of in/fidelity. Does working as a therapist predispose one to take various positions in accordance with constructions of professional experience and expectations? Drawing on a permissive discourse, one can be perceived as tolerant and wise. Nevertheless, therapists and counsellors will still claim that they are within their rights professionally to raise a moralistic discourse or, having privately condemned in/fidelity, to forego the right to be explicit about it when facing clients. By taking a wider perspective on the story and feelings of betrayal, the therapist can lend support to the client's journey towards acceptance - a therapeutic manoeuvre known as opening up new and

alternative meanings - and this, as I see it, is an ethical stance. On the other hand, such a position is also rife with power, by virtue of the therapist being seen in our culture as an expert, as one who is wise above all others and who occupies a position of moral supremacy.

How can we understand this different positioning between a private 'I' that regards in/fidelity as the worst thing that can happen, and the professional 'I' that regards it as understandable?

One possible answer to this discrepancy might be found within the systemic theoretical

ideology: that one should be less concerned with content, and more interested in contextualising problems. So perhaps we can claim that where there is a lack of therapeutic theories with distinct references to a clear technical-therapeutic approach, there is a compensatory pull, drawing systemic therapists to adopt a more permissive voice in the name of tolerance. Is this an area where we could say that, when it comes to in/fidelity, there is more discursive production than in other fields of therapy, and that as a consequence there are

then perhaps more discourses at play in the systemic therapy room than there are methods?

And is this perhaps just as it should be, namely that our very therapeutic method should simply be discursive and reflective in nature?

# Romantic love trumps

One of the "findings" in this analysis of love in danger is that therapists are not drawing on either a moralistic or a permissive discourse about in/fidelity but instead are more concerned about a context within which to understand the in/fidelity. A context for understanding in/fidelity could be one in which the one who has been unfaithful is serious or not in the new relationship. So the act in itself, the in/fidelity, is not something that simply calls up judgements or moralistic phrases from therapists; this will depend on the context. And, the other way around, therapists may talk about clients' in/fidelity in terms of being unhealthy and destructive for a relationship, but at the same time talk about her/his own experiences with in/fidelity as having been worth it. To me this incongruence is not a critique or something one should avoid, but simply an expression of discursive struggle and multiplicity. But the question is still how to navigate dominant narratives which traditionally have the power to summon people's indignation, shock and condemnation and which have a historical repertoire of revenge and calls for justice, not only within the couple but between families and allied groups. What emerged to be most surprising finding for me was that the conflicting and incongruent attitudes held by therapists towards in/fidelity in the end reflect a hierarchy of values that discursively organised my material. This hierarchy points at hearts trump all

making possible a position that in the name of romantic love in/fidelity can be legitimised. So perhaps this is the answer to the above question about what the compass should be; hearts trump all sets a standard for how to navigate in/fidelity in modern times. It can be framed as a post-modern dilemma, whereby all is well as long as you are perceived as conforming to or

conventional toward and at the same time as challenging and over-riding these conventional standards in the name of love.

Personal life crises and the use of moralistic and religious discourses

Against the background of reading the interviews with the therapists it strikes me that there might be a clear connection between life-crisis narratives and the functions of old religious and deep-rooted cultural discourses. I understand this connection as that when life crises hit with the associated feeling of losing the ground beneath one's feet – one seeks established, well known discourses, which as cultural expressions we take for granted as embodying truth. When doing the analysis it occurred to me that when issues of sexuality are at stake, moralistic and religious discourses are particularly activated. The particular ways in which moralistic and religious discourses are used differ and are dependent on the positions that people take in these narratives, such as 'victim', 'betrayer' or 'observer'. A challenge from a therapeutic stance is that such "old' cultural discourses as moralistic and religious ones have a tendency to limit people's choices to an either/or polarity as reflected in terms like I don't want to see you ever again after your unfaithfulness or how can I ever go back to my marriage after I have been unfaithful? Old narratives traditionally propose some direction for how to manage crises, but at the same time they offer positions of revenge and sanction and questions of compensation for both the "victim" and "the betrayer", as well as consequences of such positions without reflecting that these positions within a wider context might cause harm and pain to those involved in the situation. A repertoire positioning people within an either/or vocabulary when talking about in/fidelity becomes particularly complex in cases where, for example, it is used to raise doubts about the offending parent's ability to care for the children, thereby putting the un/faithful parent in the predicament of having to prove that their love for their children is stronger than their feelings for the new partner. If this is presented as an either/or situation, a parent has to demonstrate that she/he is first and foremost

a mother/father and, secondarily and less importantly, an independent person with her/his own

life. Possible choices stemming from this position include i) to leave more of the daily care of the children to the other parent, or ii) to leave the new man/woman and in so doing uphold the

continuation of the nuclear family, a choice which may be said to serve as a stabilising strategy. In such situations, old narratives in which in/fidelity was a matter of law and where one could indeed be tried for breaking marriage vows are echoed here and the therapist's way

of navigating may influence the narrative for both members of the couple. However, equally important is the fact that these old discourses are not necessarily activated as discourses of direction for how to live one's life in times of crisis, but rather as the analysis has shown, counter-discourses unfold where moralistic and religious discourses are used. These claim a morality-free message, wherein an ideal instead prevails neither of judgement nor of moralizing, but rather of freedom and open-mindedness. The case remains, however, that whether or not one draws upon moralistic or permissive discourses one is in one way or another drawn into discourses that invoke ethical and existential issues when the subjects of sexuality and in/fidelity are raised.

Talk about sex and talk about love

In the beginning of this analysis I looked for how accounts of in/fidelity were thematically presented, whether there were unitary or disparate accounts of in/fidelity and monogamy and,

if disparate, how in/fidelity and monogamy then were discursively regulated. Looking back over the analysis, I see that with the theme of in/fidelity, no talk appears to be directly connected to talk of sexuality. In other words, there are few references to sex talk in the therapist's vocabulary; the material turns out to be about something else, namely parenting issues, romantic love issues and communication problems. So talk about in/fidelity in a therapeutic setting often becomes "translated" into talk about love over talk about sex (Giddens, 1992). Talk about love as a replacement for talk about sex, when the issues are about sexual in/fidelity, might mirror different ways of framing the relationship between sex and love in contemporary times. Various accounts of how to understand love in relation to sex exist side by side. One is that it is possible to separate sex from love; such constructions are shown in utterances such as we have good sex but there is no love. Constructing sex as uncoupled from love offers a different positioning when talking about sexual in/fidelity, as in the claim that it was only sex, and I still love you. This positioning puts the therapist in a place in which s/he might take a stance toward implications of a linguistic separation of sex from

love. If therapists are positioned within a traditional romantic discourse, they will be more focused on romantic love talk, where love is good communication and sex is ideally included in the constructions of love, monogamy and good communication. When talk about sex and desire is separated from this context, sex then becomes invisible, difficult and unclear. Looking at how the romantic discourse can be said to fit with ideals for how therapy is and

should be I detect another frame of reference for understanding the absence of talk of sex within the therapeutic context of in/fidelity. This is an explanation regarding the theoretical premises of systemic therapy that focus on language; the search for therapeutic solutions in language pays less attention to sexuality and the body. Therefore in Norway, we see a distinction between professional training in sexology and training in family therapy. A lack of sexual vocabulary in the material might reflect a possible professional blind spot. Whereas in the romantic discourse, the family represents a place where sex, reproduction, emotions, parenting, and household all function together in one unit, this model is dissolving in late modernity. New practices of intimacy, sexuality and parenting are emerging and professional culture is stuck in the old model, somewhat inattentive to the new practices in which love and sex are clearly separated.

### Summary

I have in this chapter on love in danger addressed therapists' discourse on issues of in/fidelity. I analysed the various discourses in the interviews: the moralistic, psychological and gendered echo discursive readings of the material. In a context of therapy, clients' talk can be understood as an effort to manage relational and existential pain. When experiencing in/fidelity as a shock and an undesirable event, one might explore an inner dialogue, asking "Why me? Why now?" while at the same time outwardly and actively trying to find meaning in dialogue with friends, relatives, colleagues and experts such as therapists, counsellors, or priests, among others.

My subsequent tracking of the development of counter-discourses ultimately merged with the question of when it is and is not considered acceptable for a therapist to offer advice. In the discussion I questioned the therapist's role and the various positions available in relation to in/fidelity. As the analysis suggests, therapists are not detached from this tension. The material illustrates that therapists navigate differently not only in relation to the topic of in/fidelity, but to the whole context in which in/fidelity occurs. However, in the end, it seems,

heart trumps all.

Question for practitioners to work further with

How can the systemic therapist explain and understand why In/fidelity hits so hard when, at the same time, so many are said to have this experience? Is it that the old narratives trap us in

the legitimacy of condemning in/fidelity and this still-powerful force is a sign of its soundness? Or is it that because of this force, people remain immature and still allow themselves be punished by these old narratives and need to pursue a sexual revolution?

In this chapter I wish to step back from the previous chapters and discuss what I have learned from doing this research, what it has meant for me as a professional and how this research can contribute to the field of systemic couple therapy. In so doing, I allow myself to let my personal and professional voices be heard even more clearly than in the previous chapters. In the analysis chapters, discussion of the successive issues raised was interwoven throughout the chapter. In this chapter I produce an overarching discussion, structuring the chapter as follows: first a re-visiting of the research question; next, self-reflexivity issues and limitations of the study; implications of this doctoral project for my practice as a therapist and for the Norwegian systemic couple therapy field; and finally consideration of questions for exploration in further research.

Summary of research process and key findings

The main findings of the analysis are summarised here.

'At stake' issues

Out of this project emerged a new conceptualisation for me, the notion of 'at stake' questions (see Introduction). I coined the term 'at stake' issues, to address those themes in couple therapy that emerge when the couple therapist is faced with 'overarching' questions about love and intimacy. Such issues are more often voiced in a philosophical-existential vocabulary than a traditional psychological/therapeutic one. liiiThey are questions that call upon and challenge us as people in our quest to learn how to live and love. Crucial to me in the process of identifying these questions and dilemmas that couples bring to therapy was that they first emerge as quests when couples are in situations in which they must make a choice regarding a

change of direction in their lives. In my analysis, these 'at stake' questions were particularly interesting because it was apparent that such open value questions have no fixed answers in therapy textbooks but call for answers in the form of tradition, values, practices and therefore discourses. My analysis made it clear that it was 'at stake' questions that were the key to finding discourses, and they were useful for structuring the three analysis chapters that all deal with 'at stake' issues in the discourses of 'being in love', 'love in doubt' and ' love in danger'.

Between everyday discursive knowledge and professional 'expertise': the twilight zone

I demonstrated that the knowledge-in-use in couple therapy is quite existential in nature, exploring questions of how to live love in life and how to think about intimate relationships when expectations of love are confronted by friction and problems. Given one of the systemic therapeutic ideals of taking a collaborative and narrative stance in which the client is seen as an expert, it is then sound for therapists to draw upon everyday knowledge, as well as clients' own approaches to finding meaning, rather than drawing on generalised, evidencebased

methods and interventions. However, a focus for the analytic work then became: what happens in the professional empty space or 'twilight zone' between therapists' and clients' everyday knowledge, and clients? I became concerned with what happens in the space between the exercising of everyday knowledge about love, and the expectation that therapy involves receiving expert professional advice. An example of this is the difference between one's friend saying, "This relationship is unhealthy" and when one hears something similar in a professional therapeutic context. In the analysis, I was able to show that it is often unclear what belongs to a professional disciplinary domain and what is folk theory.

Hence, the next task for the analysis was to trace the processes whereby therapists draw on everyday knowledge about love and intimate relationships, and those operating when they define their utterances as definite professional 'knowledge'. I noticed that therapists were especially likely to frame their utterances as professional knowledge when 'at stake' issues arose for them. The analysis tracked how therapists position themselves differently when talking about merely sharing their thoughts with clients as opposed to speaking them in a professional mode.

As the analysis grew, I considered that the question of when therapists shift between performing (doing) 'being seriously professional', and choosing to use everyday folk ideas could be approached with a Foucauldian analysis of power and knowledge. I have recognised

in my material that the issues that influence therapists to take a serious professional voice are issues that traditionally belong to larger ethical and moral questions, such as issues of sexuality. Foucault (1980, 1981) has shown how psychology became a discipline that might be said to encourage "confessional" activities as a solution to uneasiness about relational problems.

"In producing positive knowledges, plausible truth claims and apparently dispassionate expertise,

"psy" makes it possible to govern subjects within these practices in ways that appear to be based, not

on arbitrary authority, but on the real nature of humans as psychological subjects" (p. VIII).

I have expanded on Foucault and Rose in my analysis to show how systemic couple therapy might unintentionally use knowledge and position to govern the subject regarding questions of love and intimacy. I argue that couple therapy is especially predisposed to "govern the subject" since much of the knowledge in use is traditional and loaded with agendas tied to normality and exclusion processes, such as theories about monogamy, attachment and sexuality. These issues again were traditionally located within the domains of philosophy and religion but are now transferred to psychotherapy. Psychotherapy is commonly viewed as an area of professional and "neutral" knowledge. In fact some of the participants were absolutely clear about the power-knowledge position afforded them in this view, and claimed that they had to maintain and use it because "sometimes one has to draw a line "(Analysis p.144).

Identifying evaluative speech about couples

One example of the above issue of power and knowledge in my material is talk about intimate relationships in evaluative terms such as 'good,' 'healthy', and 'satisfactory'. In the Introductory Literature Review I referred to marriage research that draws on psychological theories that premise the possibility of objective measurement and distinguish between 'functional' and 'dysfunctional' relationships. In my analysis I focused on exploring what kinds of discourses inform therapists' use of such evaluative descriptions. This is important as therapists' evaluations of relationships often serve in our society as legitimating remaining

in or leaving a relationship. I pointed to ways in which an unreflective evaluation from a couple therapist might have serious consequences if made formally within a professional context, even when the therapist might merely be drawing on everyday language and discourses.

Discursive tensions

I identified three therapeutic contexts in my material: being in love, love in doubt and love in danger. In these contexts, the therapists in my study were seen to be drawing on different interpretative repertoires and discourses wherein different subject positions were available to

be taken up. From my analysis it seemed that the discursive resources upon which therapists were drawing were indeed, as Billig says, inherently dilemmatic (Billig et al. 1988; Billig 1991). The diverse therapeutic positions identified and outlined in the analysis seemed to mirror an inherent conflict between at least two forces struggling to manifest themselves culturally: the permanence and continuity of the nuclear family in a romantic discourse, and the importance of the individual's rights and freedom to make different choices in sexuality, intimacy and love. I became particularly interested in a discursive dynamic in which therapists support, counteract or disturb clients' discourse or actively introduce alternative, sub- and counter-discourses. The discursive tensions between discourses that stabilise and discourses that de-stabilise norms, institutions and ways of organising love, sex, parenting, and intimate relationships manifest particularly when the issues are 'at-stake', as for instance in in/fidelity. An interesting observation from the Analysis is that while there seems to be a discursive dynamic, a certain hierarchy is also present. Therapists may 'defend' infidelity only in the name of love, implying that as long as you are in love and serious about it, infidelity is understandable and not blameworthy (see "Love trumps", p.148).

#### Limitations of the study

Here I review a number of decisions I made at various key points in designing and carrying out this study, for example regarding sampling. I conclude with some thoughts on conducting research in a foreign language, in my case in English.

# The sampling issues

I now realise that recruiting family therapists when working myself as an educator and supervisor has not been the easiest way to get data suitable for the research question as it has evolved. The participants and I were preoccupied with my position of being quite familiar with their work and also potentially occupying non-complementary roles that might have influenced what they disclosed. Or to put it another way, I could have analysed publicly

available texts rather than texts I had to gather myself, and thus have avoided concerns about anonymity and unclear relational issues, raised by us being "colleagues" who will see a great deal of each other further on. The model I initially chose of observing therapists in action became unnecessarily complex and I wonder whether the therapists hesitated to disclose themselves because of my position as "one of them." I think the impact this had on the

50material was that it was less filled with at-stake issues and less "rich" regarding certain issues, and this reflects that I was too "cautious" with challenging therapists and too polite.

In the analysis I think I had the same 'participants' voices' in my head, excusing and legitimating their way of doing couple therapy; perhaps I would have been less attentive to these voices and "freer" to focus on the discourses and positioning in my analysis of the material if I had not had these experiences of sitting face-to-face with the participants.

Changing my initial theory and methods - adequacy of the material

I consider whether it would have been better to have been able to follow the discursive theory and method from the start of the sampling process, as it has been challenging to have to read material initially gathered for a phenomenological study that turned out to be a discourse analysis (see p 50). One of the concerns throughout the analysis has been whether the material

has been discursive enough. Had I known from the beginning that I was to do a discourse analysis I would have asked more directly about dilemmas, themes of conflict and questions of values. From time to time during the analysis, I thought I had to "koke suppe på en spiker" (make soup out of a nail), a Norwegian expression about making something out of (almost) nothing. On the other hand, perhaps in embarking on a phenomenological study I have collected discourses in a more subtle manner in that they are not in plain view but present all the same, just as they are uttered in therapy. In this way I have seen discourses perhaps in the same way they unfold in couple therapy.

Doing research in a Norwegian context

The social context of couple therapy in this study is conditioned by the fact that Norway is a fairly small society. My impression is that in the couple therapy community, getting a job at a family therapy guidance centre holds high professional status. One sign of this is that few

family therapists quit once they have such a post. Habitus (Bourdieu, 1986) among family therapists in Norway is such that s/he is typically from the white middle class, manages to maintain an appropriate harmony in life, not too boringly traditional or too bohemian. The typical family therapist is particularly interested in communication and in processes of mediation, and they celebrate the feeling of enabling people to experience resilience and forgiveness. Norwegian family therapy forerunners and pioneers are people who, besides being in love with their work, also have relatively high incomes and stable economic

situations., are interested in art, music, literature, fond of cooking and drinking wine. They are well experienced in the various modes of "having a relationship", but they would assert ultimately that "my home is my castle".

In fairness, this is also a suitable description of me, more or less; how has this habitus similarity influenced my analysis? Knowing and respecting habitus rules such as not snooping into another's mess and chaos have informed me both in interviewing the participants and also in how I have interpreted the material. As an example, the discourses I have mapped and labelled are inspired by religious images, novels and poems hence my world of references is recognisable in my findings. A punk-and black-metal informed discourse analytic person would possibly get a quite different analysis than mine. Although I have been critical, I have been most informed by my own cultural references of not being unnecessarily rude, and being grateful, which manifest in my reading the material through the lens of best intentions, which again means, "don't push it too far". In the end, however, the question for me has been, what are the advantages and/or limitations of researching participants similar to myself? The value of this has been the opportunity to look closer at my own cultural background and explore the twilight zone of the professional/personal interface, and that has been a privileged position to have. Of course, I could have expanded more on my position in the Norwegian therapy community in the analysis, and explicitly put questions of similarity to participants on the agenda, asking myself and other readers why I see what I see here. I could have used this situation of alikeness with the participant to further enrich my analysis and thus situated myself even more distinctly.

Conducting research in a foreign language

Writing in a foreign language has been demanding, frustrating and to a certain degree limiting. Although I have had excellent professional help with the language, I have been challenged on so many levels by writing in English. First of all, not being able to find the immediate expressions has made bridging the distance between my thoughts, intentions and

desires on the one hand and the written text on the other into a long journey. What I felt got lost in this distance has been playfulness, creativity and my own sense of authority. It has also been demanding to research within a Norwegian context and with potential Norwegian readers in mind, while at the same time struggling to understand and follow English conventions for writing; the analysis and key findings would perhaps be different if I had

operated in just one cultural and linguistic context. A third issue regarding minority and majority issues has to do with the experience of expressing myself from a position of marginality because of not being able to cope well enough with the language to express myself. Burck (2004) has some useful perspective for me; pointing at the socio-political meanings of language-speaking and "the different experiences of self" (ibid: 320) and her research clarified for me, why I have felt so strange in doing this research in a foreign language – in the meaning of not being able to express myself in the way I want to express myself – and in the meaning of not being "good enough" in a wider cultural-power meaning.

The possible benefits have been that the text is perhaps more transparent. Working in a second language has filtered my thoughts in a way that has been new for me and has been a useful experience. I am so caught up in the Norwegian language that the distance created by working in English has allowed me to discover valuable nuances. As one example, I had a Norwegian expression "på spill" in mind when I worked with my proposal, as a device in clarifying my research agenda. When I looked for an English translation of that notion I found that "at stake" was explained with "risk of loss of something" and associated with notions from the financial stock market world that helped me in contextualising a clearer point of departure; something is at stake for the couple, and in a way, this "at stake" in English became stronger in denoting the risks of being a couple than the Norwegian "på spill" ("up for play", "on the table", in the sense of gambling). I have also been able to put together insights that would have been otherwise difficult to see, as when I worked with my analysis of the Norwegian term "forelskelse", similar to the English "falling in love". However, the Norwegian expression does not have the concept of "falling" in the term, and working with "falling in love" was helpful in relating to a discourse of "I cannot help falling in love". This in turn has given new insight and turned what has been framed in a taken for granted language into something new and freshly though out.

Below I will summarise my reflections on how I came to write the thesis as I did, what it has meant to me and how my therapy practice, values and assumptions interacted reciprocally with the research agenda and process leading to the research outcome. Two issues are particularly emphasised, the tension between myself as a therapist and myself as researcher and secondly the experience of becoming more politically oriented than I expected.

Tension between myself as a therapist and myself as a researcher regarding therapy issues

In the methodology chapter, an issue for me was to reflect on the different roles of being a therapist and being a researcher. Here I reflect on how the application of lenses of discourse and power impinges on the final research results. At the end of this writing-up process, are there any costs involved in the deconstruction of the professional practice of couple therapy and if so, what are they for me? I see that in my professional narrative an important motivation for me in training to be a therapist has been to solve relational riddles such as how to understand that people once deeply in love can end up not even managing to speak to each other. In my therapeutic practice, I have enjoyed the small universe of clients and myself, in which we together have explored the couple's histories, memories and dreams. During the research I have found the notions of discourses, positioning and power useful on an abstract level of analysis, explaining the relativism of categories such as marriage, love, intimacy, sexuality and the ongoing discursive struggle between stabilising and destabilising forces of love and monogamy. Doing a discourse analysis has made me conscious of therapy's status as a field in which knowledge consists of cultural constructions. This realisation has made me even more aware that knowledge in use truly is temporary and actively constructed How is one to grasp the connection between the abstract level of analysis and the level of practice where clients' subjective experiences of pain must be dealt with?

As a clinician, I wonder what will happen to my drive to solve relational mysteries with discourse analysis in mind - will this create an analytical and almost sociological-political atmosphere? Will it have a paralysing effect on my own practice in my deconstruction of the couple therapy session in itself, distancing me from clients' emotionality? Will I be in doubt about what therapy now really should be about on a fine-grained level, sitting face to face with clients? My deconstruction of my own profession of therapy and my deconstruction of love which also concerns my personal, private life has in practice meant that I have been powerfully reminded that there is a multiplicity of practices, of ways to be a couple therapist and to live with love. I do not know if this reminder has been purely positive, as too many

realities at the same time have been disturbing. In counting the costs it seems as though I have peeped into a room and have not been able to forget that I have seen the inside of this room, and this has been both liberating and distressing because what am I to do with all these perspectives? How will I deal with the two levels – the academic and critical level of analysis and the level of practice comprised of all my experience practising therapy? I must not forget

however, that clients bring the unexpected into the room, and that this in turn influences the therapist's thoughts and feelings. The therapist is not responsible for working all this out or for having perfect control of what happens. At one point in this process I heard a little voice in my head asking whether love should be referred to as 'the wordless field', that love is perhaps the last mystical frontier that should be reserved from research. I have also convinced myself that therapists are important almost in whatever they do, because people need someone who will listen to them, and perhaps they, too, should be left in peace. My critical voice has been challenged in the analysis by the protest that it is not necessary to be so critical, or to look at intentions, power and functions all the time. "Can't you just leave it as it is?" which means, "as it appears to be at first glance?" At the same time, during the research process I have been very engaged in the critical aspects, as if I had a drive to go in-depth and shape a form and a language that could reflect my initial curiosity for doing this research. I have convinced myself that the position of researcher is a powerful one and somewhat more liberating than being a therapist. Looking at a broader picture with a different aim has been another route to understanding why I became a therapist in the first place, and how I came to practice as I have done. I will account later on in this chapter for how a discursive approach to couple therapy might be conceived.

# Arriving at being political

In the exercise of self-reflexivity I ask myself why I have ended here, with a thesis that is discursively and politically oriented and not phenomenological as I first planned. A political approach to research in the first place seemed strange to me, as I have thought of myself as more interested in poems and myths than in demonstrations and political slogans.

One clear reason for my ending up political has been the experience of reading poststructuralist literature that provided me with an alternative epistemology and ontology and

which lead to the strange experience of the act of analysis of the data almost forcing me to

apply my new lenses on reality and subjectivity outside the research project as well; in appropriating these lenses, it was almost impossible not to become political and critical. I can compare this process with another theoretical watershed in my life when I was introduced to systemic thinking, which again was so strong an experience that it changed my psychodynamic inspired thinking and way of practicing therapy to a systemic orientation.

Another less obvious but related reason might be that I have identified the discursive struggle

between exclusion and inclusion processes with my experience of being marginal and different. I realize that earlier I have ransacked poems and fiction for comfort and confirmation of my narrative of being different from others. This narrative has been influenced by two experiences in particular: one is being adopted from Korea at a time when adoption was very rare; and the adult experience of living within a same-sex relationship. I have managed the experience of being different by not defining myself or my life as different, for instance by not disclosing myself to anyone but friends and family. I now see that this research has provided a channel for raising this voice and claiming space for my differences while not having to view my experiences as marginal. Combining drawing on these experiences and motivations with professional curiosity has been an important process for me, both personally and professionally.

How this research can be a contribution to the field of systemic couple therapy and suggestions for further development

In the following I account for how this research may contribute to the field of systemic couple therapy, both theoretically and to practice, mainly by pinpointing the fruitfulness of a discursive approach for the field. I do not claim to offer a complete account of its usefulness; my reflections emerged from and are limited to the work presented in this thesis.

My main suggestion is a discursive approach to systemic therapy, and I include here one example of how doing this research has influenced me in approaching discourses in couple therapy. In addition, I present issues of gender, ideology, research on the therapist, and finally the notion of voices within therapeutic practice.

I incorporate here my suggestions for further development, although I find it hard to distinguish clearly between what might be contributions to and what are issues for further development, as these are related. But for the sake of the reader, I summarise my suggestions for further theoretical and practical developments in each section, marked explicitly in the text

as "Further developments". For practitioners, these "further developments could be read together with the concrete suggestions for practice at the end of each analysis chapter, to get a

more in-depth account of clinical practice issues.

A discursive approach to systemic couple therapy

"What discursive thinking can bring to therapy is a greater awareness of how language features in

what we understand and what our communications produce" (Strong&Locke2006:587: )

Postmodern insights with relevance for systemic therapy, such as the turn from a search for 'objective' knowledge towards construction of alternative understandings based on diversity and plurality, have and must continue to have substantial implications for practice. An ongoing issue for family therapy research is to outline how this influence appears in practice. As accounted for in this thesis, a systemic perspective facilitates the value of multiple versions of reality (see Introductory Literature Review, p.22) and in fact some would said that is what a systemic perspective is. Bateson (1972) asserted the 'significance of multiple perspectives' or 'double description', - the idea of exploring an issue from different angles, or with the other's voice in mind (Shotter, 2004) with the practical implication that as a therapist, one should understand that people speak and interact in distinct ways that shape their meanings and activities. However, this research has made me question whether the systemic perspective covers my preoccupation with concepts explored in the thesis such as professional power, knowledge, dominant discourses and positioning, and that has lead me to explore how a discursive approach to systemic couple therapy might unfold in practice. What form might such a discursive approach take?

#### Hare-Mustin

A useful description of a discursive practice for me is contained in the work of Hare-Mustin (1994), who compares the therapy room to a mirrored room that reflects back just what is voiced within it. The limitations of a therapy which merely mirrors what is voiced within it, according to Hare-Mustin (and I agree) is that psychotherapy is deeply involved in the generation of values and norms, and thus requires an ethical sensibility. What I find particularly useful in Hare-Mustin's argument is her claim that family therapy could function as a form of social control, an argument that relates closely to the Foucauldian analysis of power and knowledge that informs my thesis. I claim, in line with Hare-Mustin (ibid) as one example that couple therapy might be said to serve the agenda of the dominant culture of romantic hetero-normative love (see Analysis).

Sinclair (2007) revisits Hare-Mustin's article (1994) exploring the importance of acknowledging the discursive content of the therapeutic process. A central theme of Hare-Mustin's work is that "Unless therapists recognise their participation in discursive practices they may unwittingly collude with and reinforce harmful cultural practices" (Sinclair, 2007: 147). This is a clear statement about responsibility of therapists to engage in a debate about

how political and moral issues arise in therapy. Sinclair (2007) reviews the contributions to a discursive approach of a range of authors who have pursued Hare-Mustin's ideas. She cites Sue & Sue (1999), who point to the tendency towards eurocentricity in the many approaches to treatment, and feminist therapists who criticize family systems theory for not adequately addressing issues of values, justice and responsibility in the context of patriarchal sociocultural systems such as Burck and Speed, 1995, Goldner, 1991, Hollway, 1984, 1995 Kitzinger, Wilkinson, 1995 to mention some. Although these have been important contributions to a discursive approach, there is still a need for more systematic and substantial development of ideas about what a discursive approach could and should focus upon. Sinclair (2007) claims that there is still work to do to integrate abstract concepts from discourse analysis with the more practical realm of therapy. Such a move would involve an epistemological and ideological shift to a more critical and reflexive approach, away from the ideological stance Sinclair (2007) refers to as 'liberal humanism'liv. Liberal humanism locates human problems as distinct and separate from social, cultural and political contexts within which they occur and Sinclair claims that this position produces therapists ill-equipped to consider the cultural constraints placed on their clients.

#### White

During the process of writing up this thesis with a focus on discourses in couple therapy I realise that I have almost omitted the work of Michael White. White has in fact brought the concept of discourses into the therapy room (White, 1991) and one reason why I have not paid close attention to the discursive approach in White's work is that I needed to "go into my process"; I needed first to work on writing a description of the discursive field of therapy on my own before I could recognize White's concepts as applying critical thinking to practice and as an attempt at liberating the individual from cultural practices and discourses. I realized that White applies discourses in his work in line with Foucault's thinking. One example of

discursive practice in Whites' approach is where he claims that therapists need to deconstruct people's problems by externalizing problem discourses. In White and Epston in Narrative Means to Therapeutic Ends (1990) the externalizing problem discourse is explained as "an approach to therapy that encourages persons to objectify and, at times, to personify the problem that they experience as oppressive. In this process, the problem becomes a separate entity and is external to the person or relationship that was ascribed as the problem. Those

problems that are considered to be inherent, as well as those relatively fixed qualities that are attributed to persons and to relationships are rendered less fixed and less restricting" (ibid: 38). White here makes the therapy discursive by liberating the counter-discursive practices of a person's local knowledge so that different stories about the subject can emerge that highlight preferred outcomes (1990). Counter practices might be seen as actions that invite alternative descriptions and these descriptions differ from dominant descriptions that the individual and others have previously given regarding a particular event (White, 1990). I realize however that my "overseeing" of White's writing reflects my own research focus on discourses in therapy; this may also reflect shortcomings or dilemmas in the application of a discursive perspective to personal narratives. One difficulty here might be the difference between a story and a discourse, and how to deal with personal responsibility and an ethical stance if one externalizes the problem as merely a problem-saturated narrative, such as in work with men who abuse their wives. In sum, my "light resistance" against narrative therapy is caught in the critique of Kaye; "changing a destructive narrative to a more positive narrative within the same cultural discourse is not identical to getting free of that cultural discourse (Kaye 1999:33 quoted in Sinclair, 2007)). Another question is whether externalizing is merely a technique of linguistically separating the distinction of the problem from the personal identity of the individual (Tomm, 1989). One critical point I must raise concerns the shallowness of White's emphasis on alternative stories; is his technique a way to simplify complex problems with which people struggle. I realize as well that this criticism of narrative therapy can be applied as well to my research project and the shortcomings of applying discourses in therapy and to sum up my position, that the complexity of therapy and discourses need to be further developed and elaborated, such as issues of the relativism ("epistemological correctness", Gill, 1995) and injustice, oppression and domestic violence.

An example from my own experimental discursive practice informed by doing this research

I recently worked with a couple married for about 15 years. They had lost their son in a caraccident

and eight years ago they adopted a girl now nine years old. Some years ago, she was diagnosed with ADHD. In addition, she has minor physical disabilities. This couple came to see me, because they struggled with distancing in their relationship, and had come to a crossroads of not being able to tolerate or bear more of this struggle. They had tried sincerely many things to get more intimate as a couple and as I understood it, they had tried so hard that

all the attempts at closeness had only lead to worsening of the situation. In their own words,

they had reached a level of disgust, shame, guilt and most of all, an overwhelming feeling of mutual dislike.

The one thing they really agreed on was that the best possible condition for their daughter was to continue their marriage, since they thought of themselves as better parents jointly because of the child's extra needs. Together, they could offer stability, good economy and a house well suited for her. They both expressed that providing optimal conditions for their daughter was also their common ethical responsibility.

Informed by my work on discourses I framed some of their dilemma to be a discursive one, seeing two dilemmas as potentially conflicted in their life:

- 1) Discourse about parenting: they want to be responsible parents, and they are locked into a discourse claiming that the most responsible way of being parents to their daughter is to continue marriage.
- 2) Romantic discourse: they don't love each other or like each other, but they are locked in a romantic discourse claiming that if you live together as a family, you have to love each other.

In an attempt to loosen their knotted situation, I talked with them about how different discourses are historically and culturally constructed, as people have raised children and still do without loving each other romantically while sharing a household. My aim for the therapy was first of all to free the couple from the restrictive premise that if they want to do the right thing for their daughter, they have to continue to live together, and to live together they have

to love each other. In fact, the whole idea of having to love each other in order to do the right thing is making them in fact become even more desperate, as if they are forced to identify each other as the one who is the misfortune in their life. I went on in the therapy to suggest exploring how it might be possible to continue the intimate relationship and still live together, but also unfold new possibilities, positions and choices.

Comments on the example: what I think of as a discursive practice

What I did differently than before when meeting this couple is that instead of suggesting intimacy exercises that involve exploring a couple's intimacy informed by traditional couple therapy themes of closeness, openness and forgiveness, I went more quickly on to their discursive dilemma, which I saw as caused by conflicting ideals: an ethical discourse of

responsibility informed by parenting ideals and a romantic discourse claiming love as necessary for a marriage to endure.

What I mean by a discursive approach is to recognise with much greater confidence how people use particular conversational strategies to manage pain, and I explored what the partners in the couple do with their talk and how they use talk to influence each other as speech acts (Austin, 1975). The woman in the couple above said to her husband:" you make me ashamed the way you are acting when my mother or father visit us", and this utterance might be interpreted in terms of belongings and attachment, such as it is difficult for her to be intimate and she is struggling with childhood issues. However, it might also be addressed as a cultural protest, such as I am frustrated since the discourse of being a family is telling us to be intimate and to merge our extended family, premised on the idea that we must like each other and be alike. And having had children together we need to love each other and I don't see any way out of the situation I am now trapped in.

Discursive therapy as engaging clients critically

In the example above, I asked the couple how they understood the idea that if they still wanted to live together in the same house they had to love each other at the same time. The answers were discursive, in that they expressed such answers as "of course we have to, we have not heard of anyone else doing that"; "Clearly it's unnatural and it's wrong". Discursive approaches to therapy often focus more on how any therapeutic conversation occurs than on what such conversation is about, even though many discursive thinkers concede that conversation's whats and hows are highly correlated (Strong and Lock, 2006). Discursive therapists are therefore concerned with engaging clients, critically and practically, in the languages brought to and used in therapy (ibid) and aim to engage clients critically towards their taken for granted choices, premised thinking and sets of values and rules.

Therapeutic comfort zones and ethics

Taking the example with the couple above, I can imagine some of my colleagues arguing something like, "But you cannot suggest the idea of still living together while giving up being a couple since this challenges common sense for how to live together". I argue that it depends on the positions we take up as therapists. I mean that as therapists, and given my earlier arguments about power and knowledge, we have to be willing to engage with other forms of

common sense (Kögler, 1996), and be prepared to suggest other forms of social life than those with which we are confident. In the analysis, I looked at what one can call the therapist's spinal-cord knowledge, their immediate response to a dilemma, and I claim that it is an ethical position for therapists to strive to transcend these spinal-cord reflections and introduce the unthinkable to the client. A therapist could operate within the border of what the therapist's comfort zone is and avoid discursive struggles, but I argue that discursive forces often are protecting what we refer to as normal, and the normal again is constructed intentionally; once you position yourself within the comfortable normal, you exclude both unintentionally and intentionally that which again might be liberating for the client to discuss.

Discursive therapy emphasizes that as people experience difficulties, they often are constrained within certain discursive and interpretative repertoires (Billig,1999 Hollway, 1995, Wetherell, 2001; Willig 1999) and these positions are constructed often through heavily normative processes telling people that what they are feeling, thinking or doing is wrong. A possible solution to therapeutic uneasiness is then to show clients their positioning within discourses and help them to consider discursive repositioning, thereby placing less of a burden on the individual of normative processes in meetings with new and alternative discourses.

## Further developments

The continued attraction of relational work is supported by Beck & Beck-Gernsheim (1995) who suggest that love will replace religion as an existential anchor (see Literature Review). From this viewpoint, systemic couple therapy needs to develop perspectives, concepts and interventions that grasp the way the manifold nature of love is expressed as different and sometimes conflicting discourses influencing the particular couple seeking guidance. More concretely, I would advocate a discursive approach that includes therapists inviting their clients into a wider debate about the values, norms and expectations that are available to draw

on at life crises and crossroads. And a further key question to the therapeutic field is; to what extent is couple therapy able to generate effective and less discriminatory counter discourses regarding socio-cultural arrangements for intimacy among some.

Gender issues have in different ways been raised in this thesis, as couple therapy concerns how we relate and position ourselves differently towards gender scripts. This is equally relevant for same-sex relations, since the hetero-dominate gender scripts influence and inform how couples adjust or challenge this script. The various expectations for doing gender (Butler1999) in turn raise problems and uneasiness when people experience failure in terms of these scripts. The impact of the fact that there "exist" different and conflicting gender scripts is in itself a research area, since this manifoldness constructs different expectations about femaleness and maleness and raises dilemmas and paradoxes which are then brought into the therapy room. During the analysis I was at times gender-blind, as it was really hard to pick up the gender issues in the first place, possibly since gender is so enmeshed with the initial premise of couple therapy: that men and women are fundamentally different, and need therapy to overcome this difference and adjust, as one example.

Taking a more discursive approach again; many feminist therapists reject the myth of valuefree psychotherapy. By making their biases explicit, feminist might facilitate client ownership of their values and choices. (Brown & Brodsky, 1992). Feminist family theorists have critiqued existing theories of family development, function, and dysfunction, stating that although feminism and systemic practice have traditionally been seen as two incompatible standpoints, they can be conceptualized as two parallel traditions (Goldner, 1991) Both work toward understanding the intersubjective experience that makes up the interpersonal field and

both are analogous concerns that include problems of confronting and combating power misallocation, issues of hierarchy, and the process-product debate (ibid). Working with this thesis has made me more aware of the connection between gender and therapy and I will below suggest gender-therapy issues to further research.

I will suggest three projects that extend the reach of discursive work in the field regarding gender issues. The first is to look more closely at how systemic couple therapists reflect on the connections between romantic discourse and reproduction of gender inequality, and at their styles of talk influenced in a taken for granted manner by, for instance, contemporary self-help booksly such as Men are from Mars, and Women from Venus (Gray, 1992 )lvi.

Another such question to investigate further is whether romantic love discourse stabilises

gender scripts in terms of hetero-normativity, which again might marginalise other ways of structuring love, intimacy and sexuality. Application of a poststructuralist approach (Roseneil, 2007) could thus be used to examine the premises of couple therapy. The third area is whether it is the case that therapeutic ideals such as being skilled in good communication, showing empathy, being a good listener and being concerned about relational work correspond well with female scripts in the romantic love discourse where femininity is described in terms of a concern with relational work. Couple therapy turns out to be a suitable aid in raising traditional female concerns and thereby underplays traditional masculine concerns in therapy. In this way, classic feminine discourses and couple therapy discourses are similar to ideals such as the pure relationship. It might be the case that women, therapists and societal ideals move synchronously towards particular notions about what love should be, for example that "one must understand one another, preferably intuitively in a relationship", and that these ideals become more taken for granted, since they agree exactly with therapeutic ideals. What I mean with this is that it would be very interesting to have a discussion of how dominant heterosexual discourses shape therapy and ideas about how therapy ideally should be.

Ideological agendas in systemic couple therapy

In the Literature Review I have included critical work about romantic love, such as that of Evans (2003), who raised critiques of the dominant discourse of romantic love as unreflective in its concept of individualism, the increasing commercialisation of sex and love and the preservation of gender differences. In the work with the analysis, the practical implications of the power position attached to being a professional working within a government agency with issues of love and sexuality became clearer. An example of this is how therapists argue for their responsibility to give advice in cases of infidelity and in parental issues. This position of being so close to ethical and moral dilemmas makes the systemic couple therapist into a cultural figure, playing a central role when people seek advice for what to do and think about relationships. As such, therapists occupy the same positions as members of the priesthood, teachers, philosophers, politicians and researchers, as they all negotiate, deal with, distribute

and communicate discourses, dominant as well as alternative.		
Further developments:		

I think it would be interesting to examine discourses of love in governmental documents that shape the service of couple therapy centres in Norway, as this service is free while other

services such as medical and health must be paid for. This is in itself a kind of message, one of ideological priority in maintaining the marriage as a core institution informed by Christiandemocratic

politicians.

A further search for discourses of love in relation to media therapists' expert roles is important because of the increasing and near-hegemonic power such therapists have in doing therapy in the media. It would also be interesting to look at discourses of love of therapists from three different kinds of therapeutic context, such as church-owned family therapy guidance centres, the official government-supported family therapy guidance centres and the private business therapists who hold high status .Finally, an overarching issue to work further with comes from a queer perspective. The various ways of living out intimacy and love that do not follow either the romantic/hetero-normative script nor the script where individualism is central, people that 'fall out' of the dominant discourses, either because they are excluded or because they strive for their alternative form of expression to be seen and heard (Roseneil, 2007).

These alternative expressions are not much present in systemic couple therapy yet, since couple therapy is still primarily pre-occupied with stabilising ideals of romantic love at a crossroads with ideals of individualism (as in Giddens' notion of the 'pure relationship'). "Queer" expressions of intimacy, love, sexuality and gender are not explicitly present in my material, but implicit since queer negotiations about how to live love and intimacy contribute to the creation of discursive tension. When the participants talk about what is natural and what

is unnatural for example, the unnatural is taken into the therapy room via its presence in discourse. The unnatural is negotiated away and excluded, and therefore is still there. To concretise, in the therapy example I refer to from my own practice, the dominant discourse of romantic, nuclear love was present as one possible practice.

The reason I could introduce an alternative discourse suggesting living together as just partners is that it exists as an alternative practice in our culture. In negotiating the normal, alternatives to normal already are spoken. I propose that a queer approach to research within the field of couple therapy has to be extended so that it can explore even more alternative and queer arrangements for living intimacy such as polyamory' (Anapol, 1997) or the "right" to practicising "a-sexuality" or not having a sexual relationship, without having to defend such a

stance. This for me is not just playing with thoughts but points to a further research area: queering normative thinking within hegemony of the romantic nuclear family discourse.

## Research on the therapist

In my preparation of this thesis, two things surprised me: firstly, that researchers of systemic therapy have shown limited interest in exploring the idea that both the therapist and the client play a part in therapy - research has until recently focused on the client's point of view, as if the client is the only contributor of research interest in the therapeutic conversation; and secondly, the fact that little attention has been paid by researchers to the role covert processes

may play in therapy, although there are exceptions, such as Rober (1999). My research has strengthened me in thinking that a systemic perspective has a lot to gain by importing poststructuralist theories about subjectivity, especially in the training of family therapists in

work with self-reflexivity. As seen in the Analysis and Method Chapters, approaching the

therapist's self as non-unitary and non-rational opened up ways of going beyond the

therapist's ideas of love to identify the various subject positions therapists take up.

## Further developments:

I suggest exploring further the insight about therapists as vulnerable and as dependent on the same discourses and experiences of clients in therapy with the aim of developing research methods that capture these parallel processes of couple therapists and couple therapy issues through the element of our training program called Personal and Professional Development (PPD). Reflexivity by clinician is the key topic to develop: how to pose questions to one's own practice, including deconstruction of the taken for granted premises about what the aims of therapy should be, and what it means to be "therapeutically helpful" in contemporary and

future manifold practices of love and intimacy.

An additional thought: voices versus discourses

Therapy has a long tradition of listening, and this listening has mainly taken a phenomenological approach to pain, confusion, despair and hope. One of the limitations of the concept of the 'phenomenon' is that it easily leads to a mentalistic and essentialist language of love. In response to this, the therapist might take the position of expert because of his or her professional familiarity with psychological terms for ostensibly internal or

private experiences such as anxiety, stress, anger etc. The notion of discourse is an analytical device, while the notion of the phenomenon aims to offer a language for the world of subjective experience. From the point of view of practice, there is a gap and a significant difference between experiencing lovesickness as a phenomenon and exploring lovesickness as a discourse. Bakhtin's concept of dialogue, recently referred to by a number of systemic family therapists (e.g., Andersen, 1995; Anderson, 1997; Penn & Frankfurt, 1994; Seikkula, 2002; Seikkula et al., 1995; Vedeler, 2004), might work as a conceptual bridge between phenomenon and discourse. Voices have an inner representation and a discursive form, found in the concept of polyphony. Polyphony emphasises the value of attending to many different voices at the same time (see methodology p.). In the quotation below, Bakhtin uses the terms 'discourse'lvii and 'soul' in the same breath:

Life by its very nature is dialogic. To live means to participate in dialogue: to ask questions, to heed,

to respond, to agree, and so forth. In this dialogue a person participates wholly and throughout his

whole life: with his eyes, lips, hands, soul, spirit, with his whole body and deeds. He invests his entire

self in discourse, and this discourse enters into the dialogic fabric of human life, into the world symposium. (Bakhtin, 1984, p. 293)

The importance of dialogue is frequently highlighted in systemic therapy, especially in terms of empathic listening to the client's narrative from a not-knowing position (Anderson, 1997, Rober, 2005). Bakthin's work, according to Rober (2005), demonstrates that dialogue is much more complex than a mere opposite of monologue; indeed, monologue may be understood as part of dialogism. Inspired by Bakhtin's ideas, Shotter (1993,) emphasizes the word 'practice'. He follows Wittgenstein (1953) in asserting that the meaning of words depends on the dialogical context in which the words are used. What we say is a response to what others have said before us, and our words are invitations to others to speak and give their

response. Bakhtin (1986) puts it thus:

"...any speaker is himself a respondent to a greater or lesser degree. He is not, after all, the first

speaker, the one who disturbs the eternal silence of the universe. And he presupposes not only the

existence of the language system he is using, but also the existence of preceding utterances – his own

and others' – with which his given utterance enters into one kind of relation or another (builds on

them, polemicizes with them, or simply presumes that they are already known to the listener). Any

utterance is a link in a very complexly organized chain of other utterances" (ibid: 69).

In Bakhtin's emphasis on the practice of language- how a word is actually used - and the emphasis on looking at the dialogical context, a language of phenomena simply becomes more public and external. Polyphony represents an alternative conception of the controversial concept of not-knowing (Anderson & Goolishian, 1992). The therapist takes a

not-knowing stance in the session, not because of the emptiness of his/her inner conversation, but because of its polyphonic richness (Rober, 2005). For Bakhtin, the listener is neither an innocent bystander, nor is he or she a passive receiver of a message. On the contrary, the listener is an active participant in the dialogical interaction as he or she prepares him or herself to respond to what is being heard: "He either agrees or disagrees with it, augments it, applies it, prepares for its execution, and so on" (Bakhtin, 1986, p. 68) and this captures the notion in discursive psychology about the therapist as positioned. This emphasis on the therapist as polyphonic solves the problem of the systemic therapist's apparent emptiness.

The poststructuralist view of the subject as non-rational and non-unitary might find resonance in Bakthin's concept of the polyphonic self. The polyphonic self can work as a reminder of a position which offers space for the culture's different voices by not censuring voices of shame, blame, taboos and loneliness, but embracing them as belonging to the collective voice coming from the experience of cultural conflict and fractures. By not personalising a voice of shame, but tying it meaningfully to a collective expression, one might unburden the individual somewhat while at the same time being careful not to deconstruct away the personal expression of pain. The therapeutic position, then, in addition to being a non-expert on the client's life (Anderson and Goolishian, 1992), is to fill an "expert" role in suggesting that clients' voices also echo voices from a culture in transformation, since therapeutic knowledge has the status of "truth telling", Because cultural change is a constant, there is always a need for ceremonial, cultural figures such as priests, teachers, scientists, novelists and therapists in whom trust can be placed. The therapist might take this role actively in promoting the message that we all as individuals and in different ways are bearers of the culture's pain and discursive struggles.

End of scene: Love and therapy

In this study I have questioned what therapists are drawing on when conducting couple therapy, which discourses -in-use are also expressed as therapists' personal beliefs, what kinds of professional knowledge they refer to and when it is that they shift between different types of knowledge. This research has further revealed that there is a lot at stake when talking about love in couple therapy. In late modernity, old and new practices exist side by side, and there are stabilising forces and forces that move to challenge the traditional. These dynamics are not located to clear and distinct sub-cultural groups but are seen equally often in the drama

within one person's life, between members of a couple and in families. The data indeed indicate that various vocabularies do in fact surface in a therapeutic context, bearing not merely descriptive but normative expectations of how love should be lived out and as such influencing couples' experience of their relationship and their decision to seek therapy.

In my work with this thesis I am aware that the final text might be regarded as a critique of couple therapy in general and systemic couple therapy in particular. This has not been my intention, but as the process has taken shape I realise that I have developed a sharper critique of some aspects of couple therapy practice. This is so because despite systemic couple therapy's respectful non-expert, cautious attitude to the couple, the systemic therapeutic attitude can still communicate the impression that something is "wrong" with the individuals and/or the couple as they struggle with their relationship. This happens when problems and their causes are viewed as personalised, and the broader perspective that contemporary couples and individuals also struggle because of transformations of love and intimacy in the wider context of culture and history is ignored. We have an expression in Norway of being "nærsynt" which in English would be translated as "short-sighted". My critique of systemic theories lies in the fact that they mostly have excluded a broader understanding of why couples struggle by continuing on an interpersonal, relational level without taking account of discourses, although there are of course exceptions (White and Epston (1989). There is further work to be done in outlining the relation between local therapeutic practices and the macro level of societal networks of power. I have just managed to get on the trail of the many dilemmas built into this work and unfortunately, I am only now, at the end of this thesis, fully aware of the existing research on discursive therapy and micro-macro relationships in therapy.

What is of particular interest to me is to what extent the analysis has shown that these same client vocabularies are in fact also those of the therapists greeting them. My findings lie in sum in the discovery of a discursive dynamic, namely the extent to which and in which ways the therapists support, counteract, disturb or actively introduce alternative, sub- and counterdiscourses.

I claim that therapeutic culture is also discursively constructed in dominant ways and I hope this thesis has shown that the multiplicity of approaches in couple therapy needs to be further verbalised, investigated and challenged through a discursive couple therapy with the aim of deconstructing taken for granted knowledge and the hidden and unintended uses of

power by professionals to offer a repertoire of interventions for therapists when facing the different facets of contemporary love.

The complexity of love also means that couple therapy is a multifaceted professional occupation. Love and difficulties with love are talked about in a couple therapy context as both the reason for pain and at the same time as a solution to fragmentation and alienation. One is driven out in homelessness because of love and at the same time people find escape in love relations. Multiple cultural framings of love can coexist side by side, as seen in the analysis, and I regard it as a strength that therapists draw on multiple readings of love when doing therapy, because they then might reflect and mirror the cultural manifoldness of love in contemporary times. That therapists draw on multiple readings of love is not in the end a critique of therapists; as I see it, it is valuable for practice and for the complexity of the problems, hopes and expectations among people searching for help in living love in their lives.

I wrote this text after completing the analysis, realising that the same discourses which I had explored in the analysis are dealt with by other professionals such as Tarot-readers, and that indeed, clients seek them out with the same trust as in their search for therapists. It was amusing to write my associations down in this little narrative and I leave it to the reader to decide if it holds echoes or memories of value for the reader (in which case I am pleased). It is meant merely as a reminder that the mystery of love will continue to be searched for and that discourses of love are all around us.

A short meeting with a gypsy woman, Rose, and her tarot cards

It was early on a Saturday morning in May and the air was crisp. Two friends, Mary and Ida, had parked their car and the eldest of the two women, Ida, held a newspaper notice in her hands. They had found the address they had been looking for. It was a café, an old café that had had many functions but was today a fortune-telling cafe.

They went quietly up the stairs to the second floor. The stairs were dark and dusty, but the locale was airy by contrast, though it smelled of old cigarette smoke. When Mary reached the second floor, she saw a man, tall, sunburned and handsome, sitting at a desk covered with a cloth. He smiled. "Do you want a reading?" he asked. Mary turned to look at her friend, who said, "well, we'll just take a few minutes, we're just looking around." "Oh", the man said, "are you two from the press? We don't like journalists". "No, we're not from the press. How come you thought so?" said Ida. "You two are so critical," he said. "My intuition tells me to be cautious with you two." The two friends looked at each other. It was as if they could read each other's thoughts, and were saying, " Now we should really be suspicious." Ida, the eldest of the two friends said, "we're here for a reading, but we just want to sit down for a

minute, have a cup of tea, yes, and just sit down". The young man grinned. "Sit down, have a cup of tea and look out there in the corner, there's my wife. You can call her Rose." Mary saw a woman sitting and reading a magazine. She looked young, almost like a teenager. "Rose is waiting for you two, just to tell you your destiny. She's so good."

The two friends ordered a cup of tea. They giggled a little, asking each other if they really were going to do this. But there was really no question about it. Both of them had cash, since

the gypsy woman didn't take credit cards. It had been a demanding year for both friends, and they really wanted to reassure themselves that this coming one would be one of the better ones. "What do you want to know?" Ida asked Mary. Mary said, "Maybe something about a new job and money, and of course, love" she said and laughed loudly. Ida nodded, they knew each other well, they had told each other everything of significance, and they were equally good at analysing each other's narratives. Now they were both seeking help for something they both had no knowledge of, the future, how it would be in the future.

Mary was the first one to be read. Rose's hand was so thin when they greeted each other. Rose was dark and wore a cap on her head. Mary sat down and Rose took her cards in her hands, flip, flop, laid them on the table in an arrow and then she seemed to have second thoughts, because she took the cards in her hands again, flip-flop. "Destiny" said Rose. "Destiny is waiting for you. I am now going to lay your cards and read them. I am 98% clairvoyant," she said. "Fine", said Mary. Mary felt strange, almost sad, and she looked at Rose and said, "I have never done this before." "Don't be afraid," Rose replied. "The cards will tell you." The first card, a dead man, was revealed and Rose smiled. "Oh, this is so good," she said. "Love will come. You have had a lot of sorrow, I can tell, my cards tell me. But now love will come. For sure, I Know. Something will happen, when you're ready. You're not ready." "How do you know this?" said Mary, quiet. "Oh -oh," Rose said, "the card tells me." Mary wondered if she had irritated Rose, so she didn't ask any more. Rose repeated, now somewhat more lightly, "Oh, you deserve to have it good. You are very generous, you're strong, you were a little girl, back then, you gave too much. You've learned a very hard lesson." Flipp, flapp. A card felt out of the stock.

"Oops," Rose looked at the card, silent, and there was a long pause. "The past," she said, and then she stopped. And then, "Snowy weather, cold outside, you shall learn to be loved." Mary asked again, "eh, what do you mean, snowy weather?" Rose smiled, "look in the mirror. The mirror will tell you, this is your feeling. Everybody needs to have a good life." Mary was silent, she didn't ask any more questions, she didn't comment, just nodded very carefully. She

saw Rose look at the alarm clock on the table, a huge clock with a Mickey Mouse head. Rose lifted her voice, and nodded. "Yes, I think there will be a new one. It is coming now. A new start will come. You know I told you, I am 98% clairvoyant, you have to trust me." Mary was still sad and anxious, the time had run out so quickly and she had so many questions. Mary

wanted to understand what Rose meant, and asked, "How will I know that the right one is there?" "Oh, you will know in your heart," said Rose, almost comforting her with her voice. "The time is up," said Rose. Rose raised her voice when Mary left the table, and as she went she heard her say, "you must remember, my friend, Love will come. Love will come."

Endnotes
i Hendrick and Hendrick, 2000 offer a valuable contribution to love research.
ii The development of a Romantic Beliefs Scale (RBS) (Sprecher & Metts, 1999) that assesses beliefs about
romantic love along four dimensions was useful in preparation of the semi-structured interview in my research.
iii Self-report as the only method for research was challenged in the mid-1950s as researchers (see Burgess,
Locke and Thomes, 1971) began to develop standardised short-form measures of marital satisfaction and could
claim on the basis of the first longitudinal studies, that (for instance) for most couples, marital satisfaction
was
high immediately after the wedding, while it gradually decreased and often ended in disappointment and
disillusion (ibid).iii
v As mentioned earlier in this historical review, the development of couple and family therapy was characterised
by a shift in focus from individuals to relationships (Haley 1964).

The authors refer to Broderick and Schrader's (1981, 1991) classic tracing of marital counselling from a pioneer stage (1929-1932) dominated by very few practitioners, to the phase of establishment, signified by the formation of The American Association of Marriage Counsellors, on to a phase of Consolidation, leading to the first legal recognition of marriage counselling in California in 1963, and finally to a phase (1964-1978) called the formative stage, marked by the building of a professional literature and clarification of standards and practice. What is interesting about this reference to Broderick and Schrader's review is that here Gurman and Fraenkl question and illuminate an issue needing closer examination, namely what happened to marital therapy after 1978, when it appears to end. vi One reference is the Tavistock Marital Studies Institute with the influential work of Clulow and Ruszczinski, among others. vii I use the term 'couple therapy' in this thesis because it emphasises 'couple' and the relationship more than the institution of marriage, except when I refer to marriage therapy or research in order to discuss historical marriage

therapy.

viii Olson, further quoted in Gurman and Fraenkl, asks, whether there was "a parallel but unrelated development

of the marital and family therapy field" (Olson, 1970, p. 501) because "none of the pioneers were recognised as

innovators in both fields" (p. 506).

ix One might wonder if this is a very European view as one notices that the family therapy literature from the US

refers consistently to 'Marital and Family Therapy (MFT)' as one entity.

x Ovid: Metamorphoses I-IV.

xi In pre-modern times, being passionately in love was separated from daily routines and claims, but in modern

times this separation is conflicted. Many times I have seen and heard 'victims' of love, sitting in the therapy

room, not having slept in days, losing weight, unable to concentrate on their children, their spouse or their work.

All they can hear or see is the beloved, and all they can think of is the last meeting and how to plan the next

while their regular life commitments demand another focus.

xii Snow White And the Seven Dwarves lyrics

xiii Shorter (1975) further explains and emphasises the middle class as pioneering this model, with the motherchild

(baby) constellation as the nuclear relation which expands to embrace the father and husband. An

interesting observation in this regard is the contemporary Norwegian ideal of fathers having permisjon (leave

from work) to stay at home with their newborn child on a par with the mother.

xiv Closing Time From The Future: More Best Of Leonard Cohen; The Essential Leonard Cohen, Stranger Music.

xv The rise of the pure relationship is related in a complex way to globalisation and the growth of expert systems

(Gross 2002)

1) The decontextualised knowledge on which expert systems rest undermines the authority of tradition while globalisation simultaneously brings people into contact with a wide variety of cultural

practices. Lifestyle choices become the very core of self-identity.

2) As individuals pursue self-actualisation they become increasingly reliant on therapeutic discourses.

These systems ask the individual to continually conduct a self-interrogation in terms of what is happening in the relationship so that the status of the relationship and its dynamic can be assessed.

Expert systems refuse to bow to traditional authority as such; reliance on therapy or the discourse

surrounding it leads people away from relationships in which they are constrained by tradition, away

from the roma their	ntic love ideal and toward the pure love relationship (NB Therapists are active in
pushing).	
3) There is gre their	ater trust in expert systems in that individuals are becoming less oriented than
counterparts w	vere in the past toward local kinship groups
xvi This reflexiv	rity is to be understood by looking at the late modern revolution, the break in y with
previously give	n traditions, norms and institutions.
xvii These are o	concepts that in this context point to the new age of modernity replacing the old
of	
industrial socie	ty.
xviii The Protes ties, such as	stant Reformation is significant in that it separated people from their traditional
the	
church, resultir mobility.	ng in the modern processes of secularisation, urbanisation and personal

xix The most important contribution to my thinking is the notion of "the normal chaos of love" and its attention

to the paradoxes in contemporary approaches to love - namely that love is more important than ever and at the

same time more insecure than before.

xx Wetherell accounts for subjectivity and identity by claiming, "We are saying that a sense of identity is always

an invention, a construction, a melding and meeting point of discourses" (1995:135) and she draws on Hall

(1988) to take this point further: "Identity, he says, is formed at the unstable point where the unspeakable

stories

of subjectivity meet the narratives of history, of a culture (Hall 1988 quoted in Wetherell, 1995). This kind of

approach makes space for what might be useful therapeutically when talking about love and romance, namely a

position to take up, almost a perspective on life, that we use to live with ambivalence, contradictions and

fragmentations.

xxi I say more on Foucault and power in the Methodology chapter.

xxii Thanks to Wencke Muhlausen for showing me this possibility.

xxiii For example, during the 1950s it was commonly invoked to produce the required norms of conduct in

women, encouraging them away from their jobs and back into the home so that demobilised servicemen could

return to both a 'traditional wife' and a job. Women are thus designated as the subject of this discourse, in that

they must be married or at least conducting a relationship in order to have a sexual liaison. Men, on the other

hand, are the objects of the discourse, since their acquisition as husbands and lovers is required before a sexual

relationship is allowed to exist for a woman (ibid).

xxiv Butler (1990) utilises the concept of a heterosexual matrix to identify this naturalised process of gender

hetero-normalisation. Butler perceives this heterosexual matrix as "a grid of cultural intelligibility through

which bodies, genders, and desires are naturalised". In Butler's perspective, it is the presumption of

heterosexuality that ascribes bodies as gendered, rather than traditional perspectives that uphold the natural

distinction of bodies into male and female that signifies the normality and naturalness of heterosexuality. Being

and performing is an important constellation in Butler's theory of gender. Similar to the construction of gender,

sexuality is socially and culturally constituted, with desire constructed and policed through powerful societal

discourses and social practices that are institutionally and individually supported at both the micro and macro

levels in society.

xxv After I had done the pilot interview, I reviewed articles about Interpersonal Process Recall (IPR) that

emphasised IPR as a supervision strategy empowering counsellors to understand and act upon perceptions to

which they might otherwise not attend (Kagan et.al. 1975, 1980 Elliot ,1989).

xxvi In making choices between contradictory demands there is a complex weaving together of the positions that

are available within a number of discourses: the emotional meaning attached to each of those positions which has

been developed as a result of personal experience of being located in each position, or of relating to someone in

that position; the stories through which those categories and emotions are being made sense of; and the moral

system that links and legitimates the choices that are being made.

xxvii A parallel to this development can be traced when looking at shopping ideals and practices. I remember my

parents and their generation's joy at buying something solid, a treasure, and well worth their financial investment

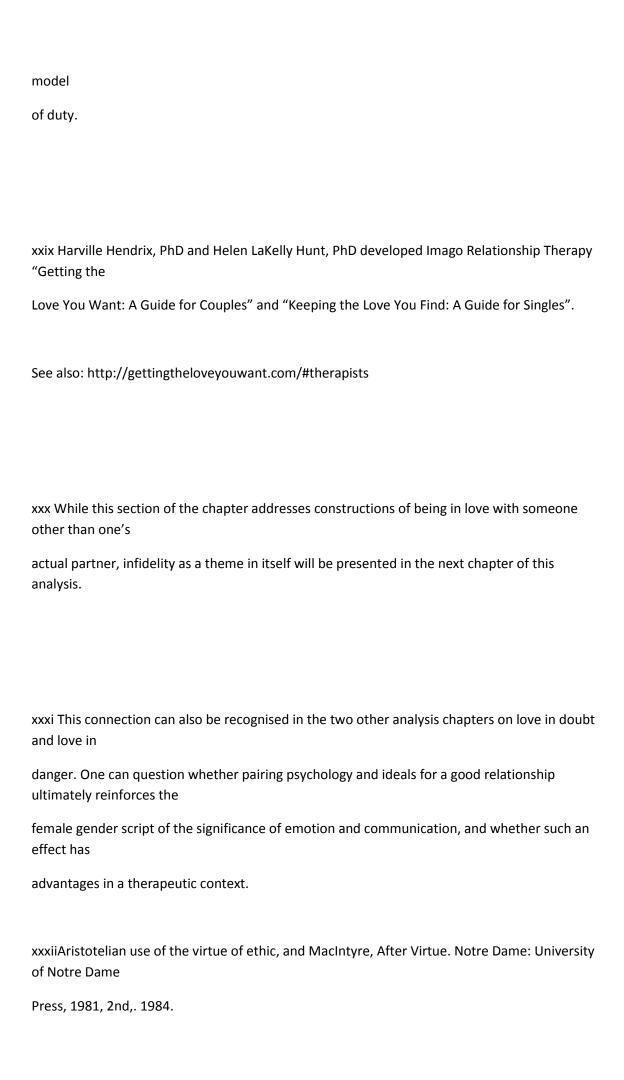
such as furniture. Looking further back to the grandparents' generation, the same ideal was even more potent,

focused as they were on investing in something that could be inherited, something that would "stay in the family

generation after generation". These days, a new shopping pattern can be traced, one in which the instant of the

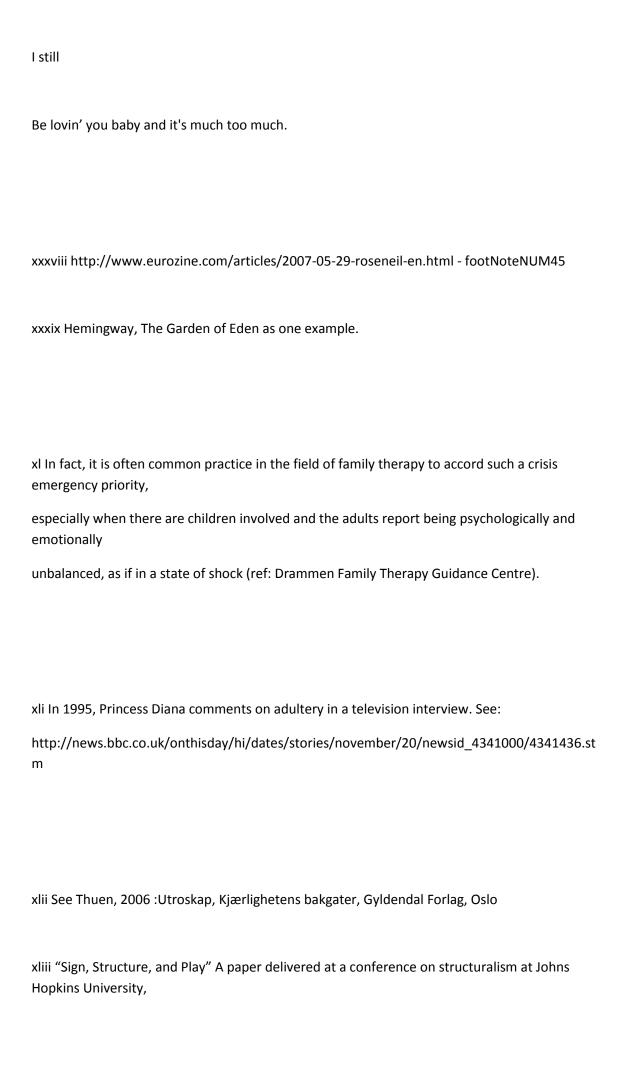
purchase is the moment of joy, a pleasure in itself.

xxviii I refer here to an Aristotelian ethical model in which virtue is an ideal of life, and to a Kantian ethical



xxxiv This view of humans can be traced in the history of philosophy. According to Hobbes, human beings left to
their own
egoism and strategies will kill each other if following their natural instincts, as in a state of chaos. His recipe
for how to
survive with optimal benefits is the rule of law and order governing behaviour and protecting us from one another
so that we
can pursue our personal pleasures.
xxxv When writing this thesis I heard on a radio programme that this hit by Nazareth was ranked by many as the
ultimate love song,
xxxvi Such a belief about love can be recognised in the pre-modern view of love and through descriptions of the
love-sick in which love is regarded as passionate and in which there is no intention to institutionalise it within
the framework of marriage.
xxxvii Still, Macy Grey:
In my last years with him there were bruises
On my face





xliv In keeping with and as a consequence of such a perspective, I as researcher must also be considered a

participant in both the research process and its final product, making in turn such an acknowledgement

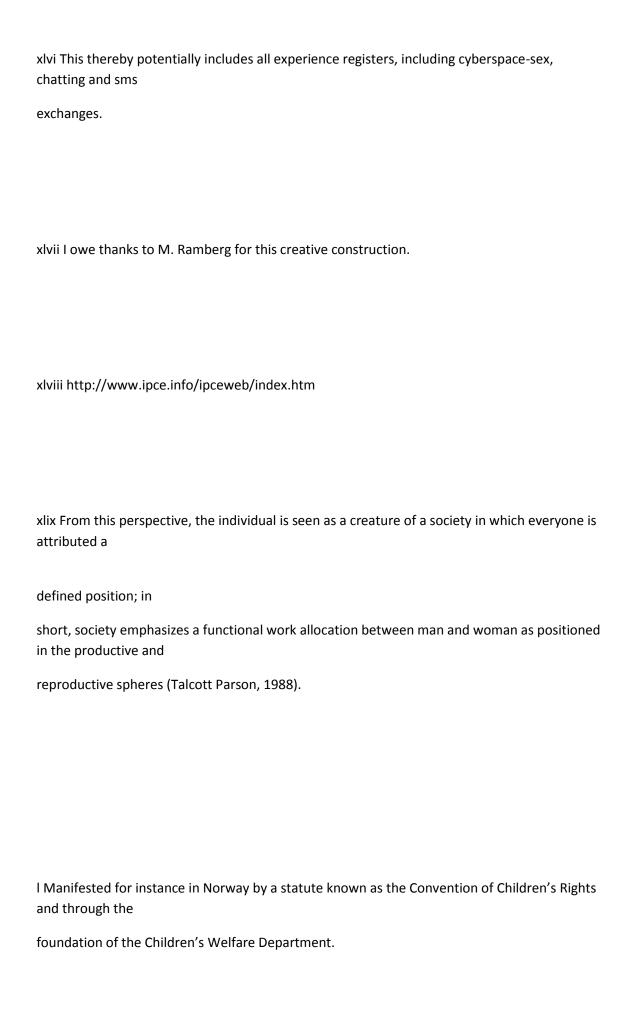
necessary. See Methodology chapter (p. x).

xlv This definition is inspired by C. Harris' research on gender and infidelity (2000), Psychophysiological

responses to Imagined infidelity: the specific innate modular view of jealousy reconsidered, Journal of

Personality and Social Psychology, Vol.78 (6), 1082-1091, as well as by clients' own words when describing

this feeling towards a relationship they feel insecure and unsure about.

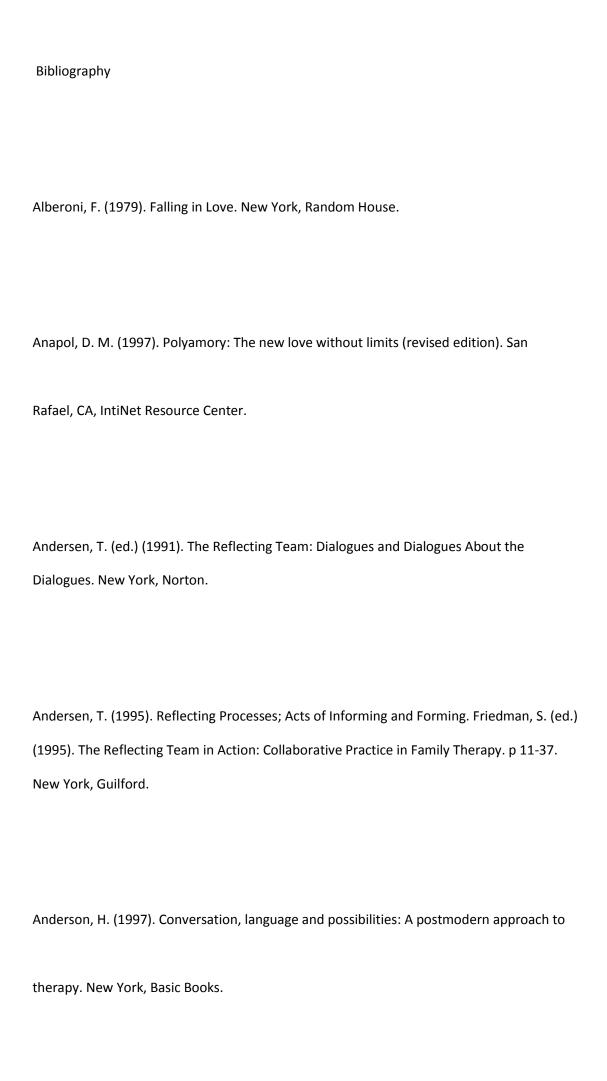


li The Nike slogan Just Do It introduced in 1988, http://en.wikipedia.org/wiki/Nike,_Inc.
lii Lov av 4. juli 1991 nr. 47
liii I realised though, during further reading about discourse analysis, that at-stakeness, though, is a well known
dimension in DA.
Liberal humanism is, according to Downing (2000), the approach that has dominated mainstream counselling
and psychotherapy. The liberal humanist tradition pioneered in the 1960s is influenced by psychologists such as
Allport, Maslow and Rogers and this approach identifies the individual as the central agent of all social
phenomena, framing the self as independent and stable and emphasising the individual's capacity for choice,
freedom and self-development (Jenkins, 2001).
liv
lv See for instance Zimmerman, Holm, Starrels: "A feminist analysis of self-help bestsellers for improving
relationships: a decade review, Journal of Marital and Family Therapy, 2001, Vol 27 No.2 165-175).

lvi I have argued throughout this thesis that a romantic discourse, makes available positions to take up which

reproduce gender inequality and it is an issue for further research how therapists doing couple therapy are

influenced by the romantic love discourse as an ideal for intimate relationships.



Anderson, H. & Goolishian, H. (1988). Human Systems as Linguistic Systems: Preliminary
and Evolving Ideas about the Implications for Clinical Theory. Family Process, Vol. 27, p
371_303

Anderson, H. & Goolishian, H. (1992). The Client is the Expert: a Not-Knowing Approach to Therapy. In McNamee, S. & Gergen, K. (eds.) Therapy as Social Construction. London, Sage Publications.

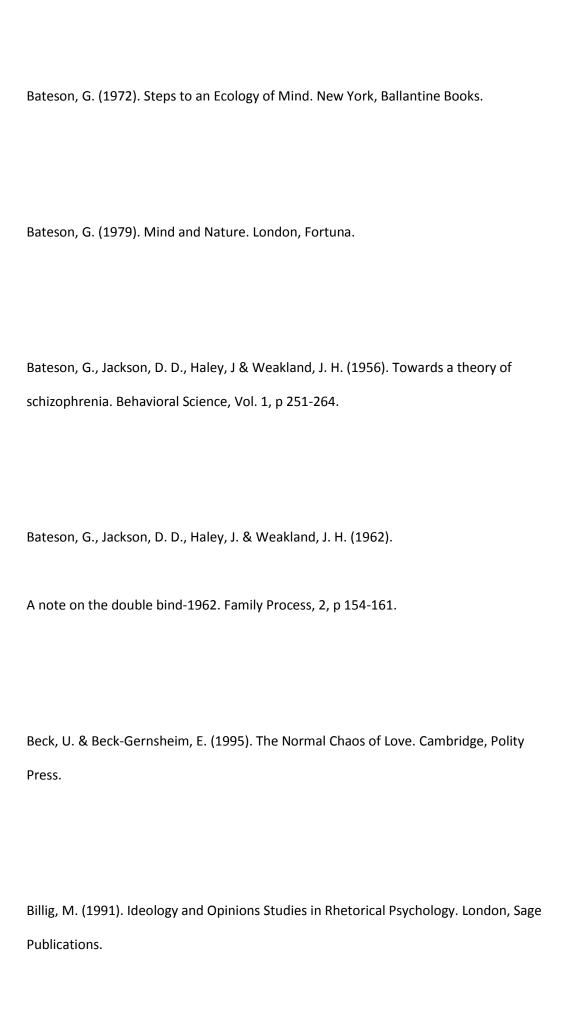
## Arnhøy &

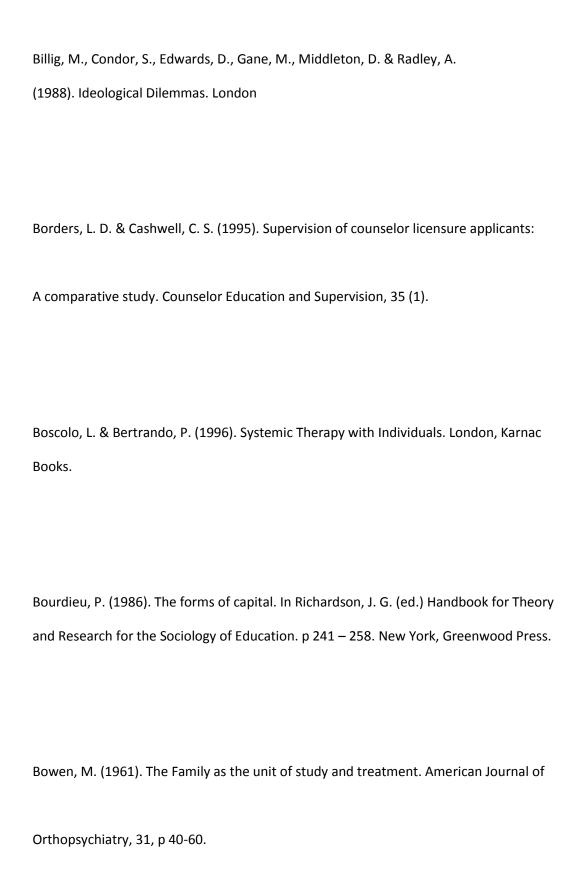
Hansen, http://www.sv.no/partiet/stortingsgruppen/kultur/regnskap/dbaFile59975.html. From

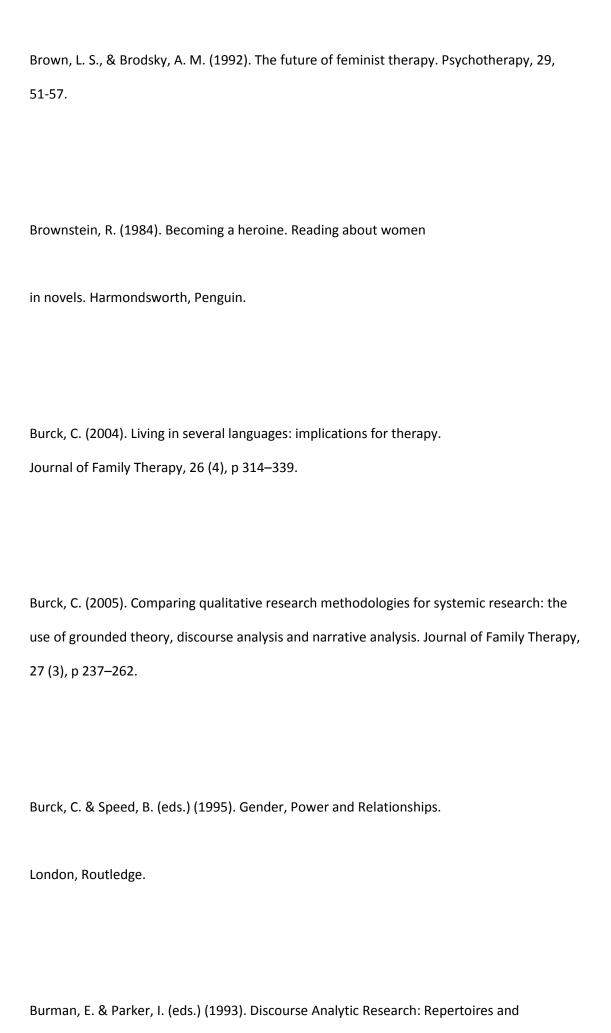
internet 15.01

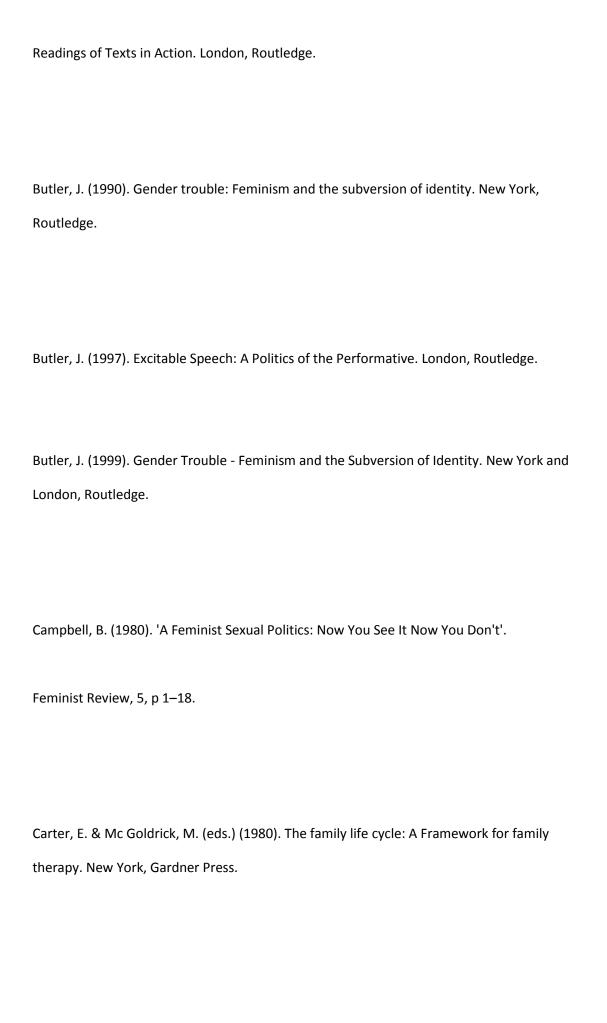
Austin, J. L. (1975). How to do things with words (2. edition). Urmson, J. O. & Sbisn, M. (eds.) Oxford, Clarendon Press.

Bakhtin, M. M. (1986). Speech Genres and Other Late Essays. Translated by McGee, V. W. Austin, University of Texas Press.



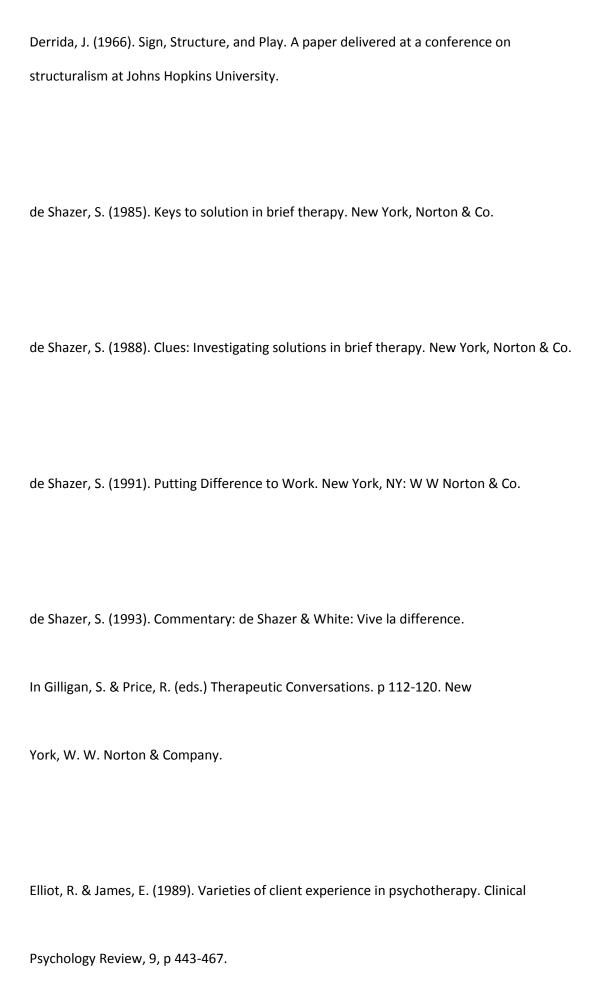


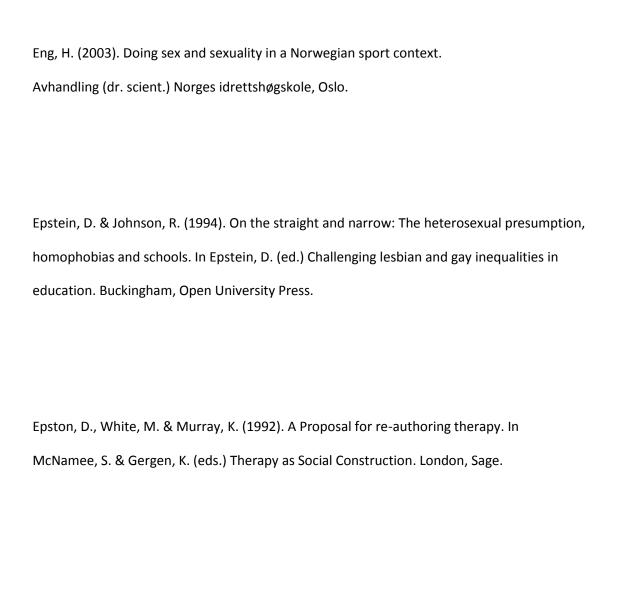




Cecchin, G. (1987). Hypothesizing, circularity and neutrality revisited: an invitation to
curiosity. Family Process, 26, p 405-413.
Clark, A. (1996). Reading between the lines of the therapeutic conversation: An investigation
into the covert world of the client and the therapist. Oslo, University of Oslo.
Clark, K. & Holquist, M. (1984). Mikhail Bakhtin. Cambridge, Belknap-Harvard University
Press.
Clulow, C. (2001). Adult Attachment and Couple Psychotherapy. East Sussex, Brunner –
Routledge, Taylor and Francis group.
Cobuild, (2001). Collins Cobuild English Dictionary for Advanced Learners. (3. edition).
Glasgow, HarperCollins Publishers.
Conrad, P. (1987). The experience of illness: recent and new directions. Research in the
Sociology of Health Care, 6, p 1-31.

Coontz, S. (2005). Marriage, A History: From Obedience to Intimacy, or How Love
Conquered Marriage. New York, Viking.
Davies, B. (1999). The Discourse of Love. Melbourne Studies in Education, 40 (2), p 41-57.
Davies, B. & Harré, R. (1999 b). Positioning and personhood. In Harré, R. & Van Langenhove, L. (eds.) Positioning Theory. Oxford, Blackwell.
Davies, B. & Harré, R. (2001). Positioning: The Discursive Production of
Selves. In Wetherell, M., Taylor, S. & Yates, S. J. (eds.) Discourse Theory
and Practice. A Reader. p 261-271. London, Thousand Oaks and New Delhi, Sage.
Denscombe, M. (2002). Ground Rules for Good Research. Buckingham, Open University Press.

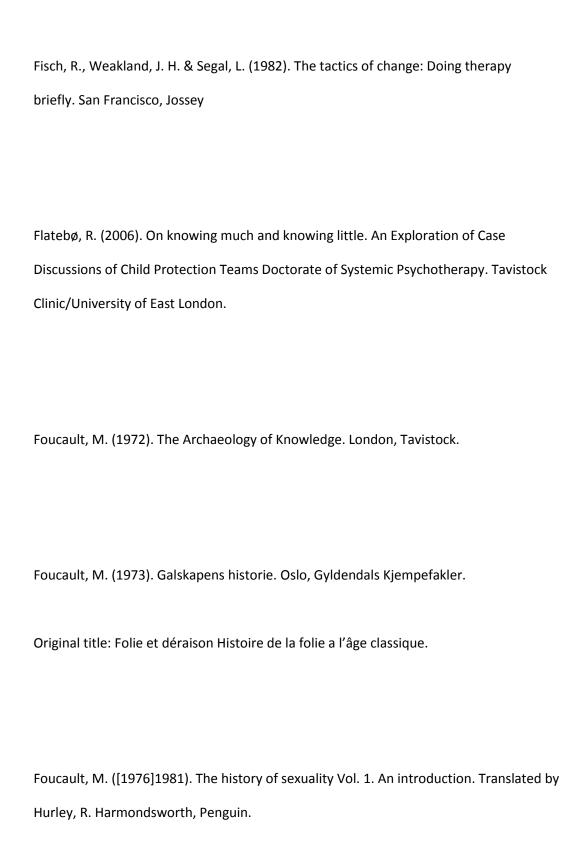




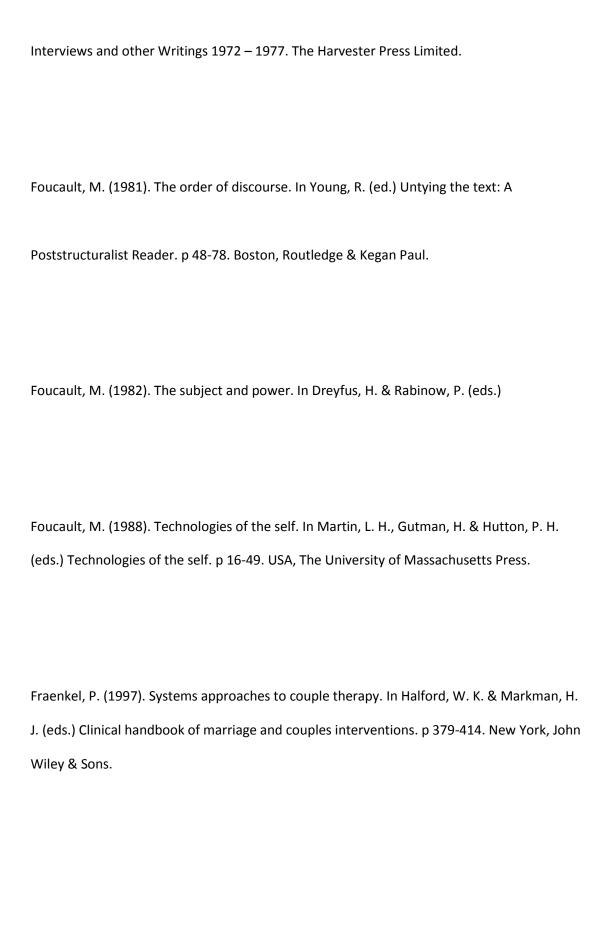
Evans, M. (2003). Love: An Unromantic Discussion. Cambridge, Polity Press.

Faldbakken (2001): http://www.dagbladet.no/kultur/2001/08/31/278560.html. From internet 27.11.2006.

Figueroa, H. & López, M. (1991). 'Commentary on discourse analysis workshop/conference', paper for Second Discourse Analysis Workshop/Conference, Manchester Polytechnic, July. In Burman, E. & Parker, I. (eds.) (1993). Discourse Analytic Research: Repertoires and Readings of Texts in Action. London, Routledge.



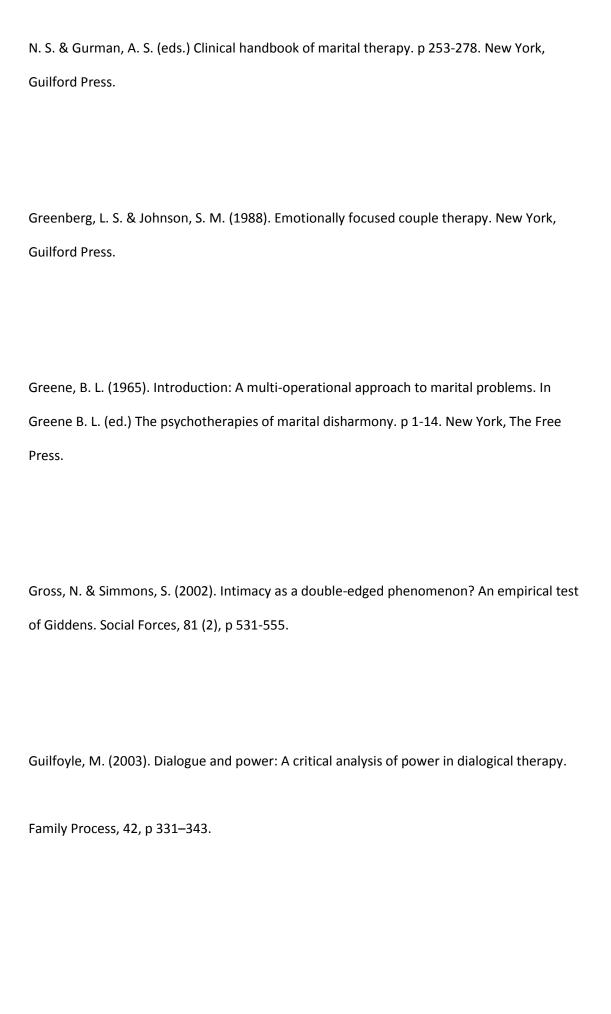
Foucault, M. (1980). Truth and power. In Gordon, C. (ed.) Power/Knowledge Selected



Føllesdal, D. (1994). Edmund Husserl. In Eriksen, T. B. (ed.) 1994 Vestens tenkere. Bind 3.
Aschehoug.
Gergen, K. (1985). The Social Constructions Movement in modern psychology. American
Psychologist, 40, p 266–275.
Gergen, K. J. (1994). The cultural consequences of deficit discourse. In Gergen, K.
J. Realities and Relationships. Cambridge Ma, Harvard University Press
Gergen, K. J. (1994). Realities and Relationships Soundings in Social Construction. Harvard
University Press.
Giddens, A. (1991). Modernity and Self-identity. Self and Society in the Late Modern Age.  Cambridge, Polity Press.
cumbridge, Folity Fress.
Ciddons A (1002). The Transformation of Intimacy: Sovuality, Love and Ereticism in
Giddens, A. (1992). The Transformation of Intimacy: Sexuality, Love and Eroticism in Modern Societies. Cambridge, Polity Press.

Gill, R. (1996). Discourse analysis: Methodological aspects. In Richardson, J. E.
(ed.) Handbook of Qualitative Research Methods for Psychology and the Social Sciences.
Leicester, British Psychologica
Gill, R. (2000). Discourse Analysis. Qualitative Research. With Text, Image and
Sound. In Bauer & Gaskell (eds.) London, Sage Publication.
Goldner, V. (1991). Feminism and systemic practice: Two critical traditions in transition.
Journal of Strategic and Systems Therapy, 10, p 118-126.
Gottman, J. M. & Notarius, C. I. (2002). Marital Research in the 20th Century and Research
Agenda for the 21st Century. Family Process, 41 (2), p 159-197.
Gray, J. (1992). Men are from Mars, women are from Venus: A practical guide for improving
communication and getting what you want in your relationships. New York, HarperCollins.

Greenberg, L. S., & Johnson, S. M. (1986). Emotionally focused couples therapy. In Jacobson,



Gurman, A. S. & Fraenkel, P. (2002). The History of Couple Therapy. Family Process, 41 (2), p 199-260.

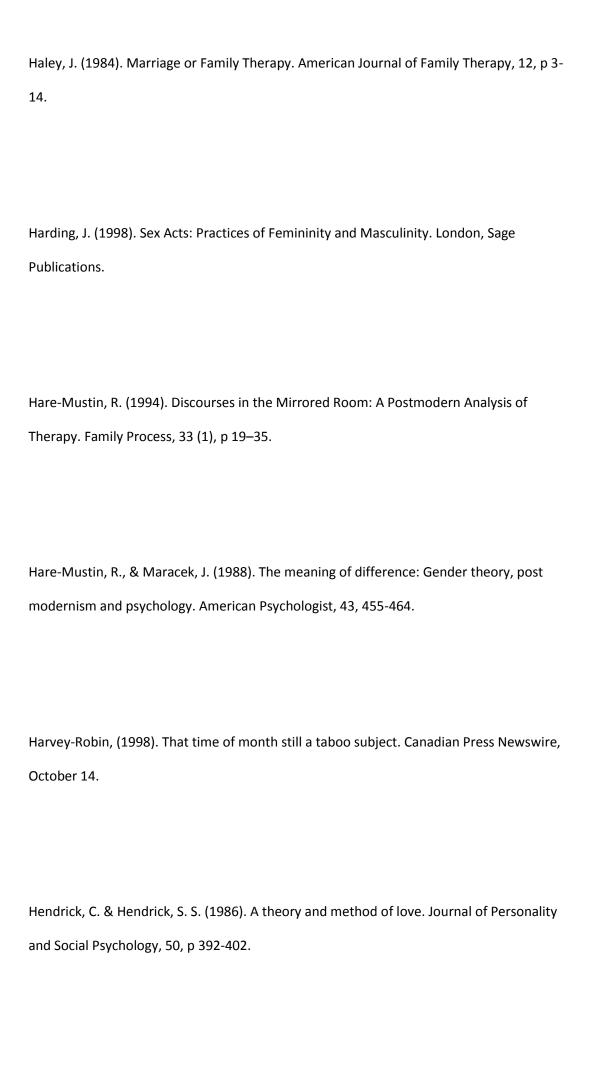
Haavind, H. (ed.) (2000). Kjønn og fortolkende metode: Metodiske muligheter i kvalitativ forskning. Gyldendal Norsk Forlag.

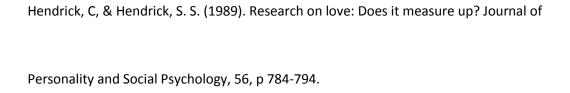
Hacking, I. (1986). Making Up People. In Heller, T. (ed.) Reconstructing Individualism.

p 222-236. Stanford University Press.

Hacking, I. (1995) The Looping Effect of Human Kinds. In Sperber, D. (ed.) Causal Cognition: An Interdisciplinary Approach. p 351-383. Oxford, Oxford University Press.

Hahlweg, K. & Markman, H. J. (1988). Effectiveness of behavioral marital therapy: Empirical status of behavioral techniques in preventing and alleviating distress. Journal of Consulting and Clinical Psychology, 56, p 440-447.





Herek, G. (ed.) (1998). Stigma and sexual orientation: Understanding prejudice against lesbians, gay men, and bisexuals. Thousand Oaks, CA, Sage.

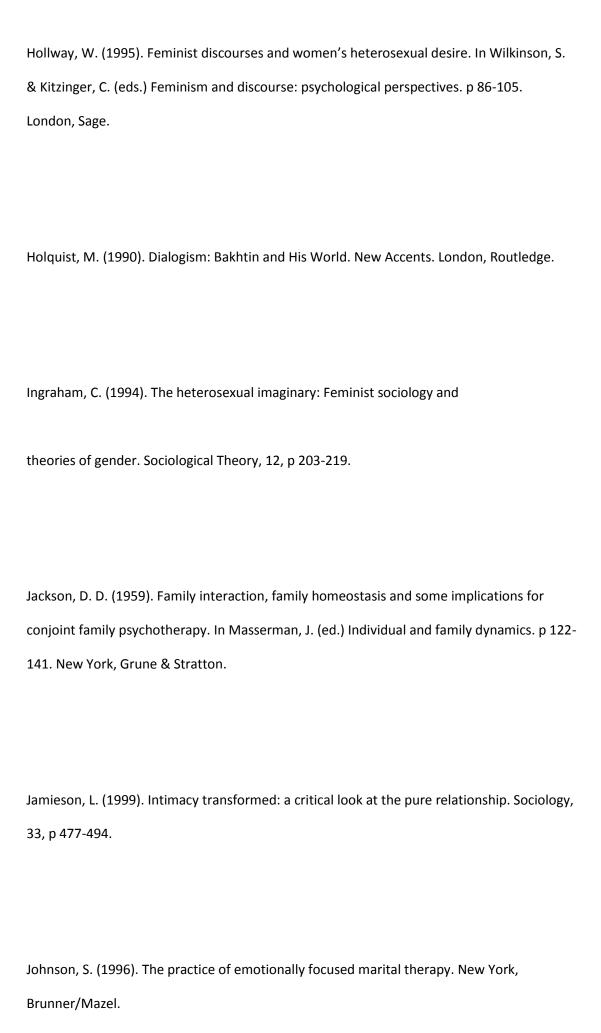
Hoffman, L. (1987). La oss legge makt og kontroll bak oss: Mot en 2. ordens systemisk familieterapi. Fokus på Familien, Vol. 15, p 129-145.

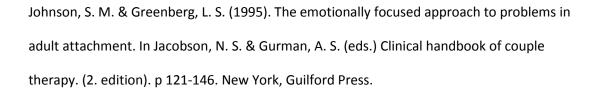
Hollway, W. (1984). Gender difference and the production of subjectivity. In

Henriques, J., Hollway, W., Urwin, C., Venn, C. & Walkerdine, V. Changing

the subject: Psychology, social regulation and subjectivity. p 227–263. London, Methuen.

Hollway, W. (1989). Subjectivity and Method in Psychology. London, Sage.





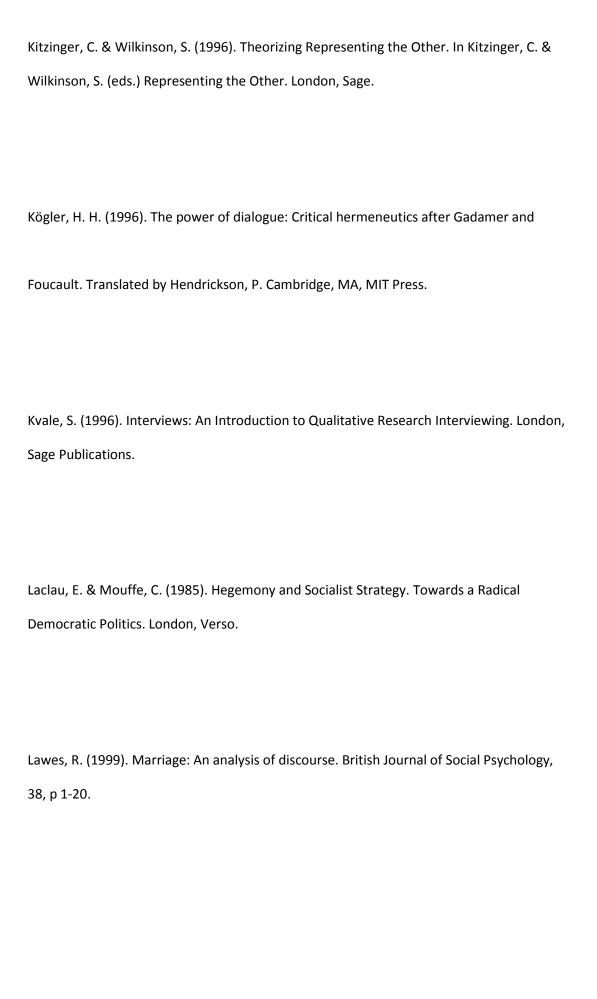
Kagan, N. (1975). Interpersonal process recall: A method of influencing human interaction.

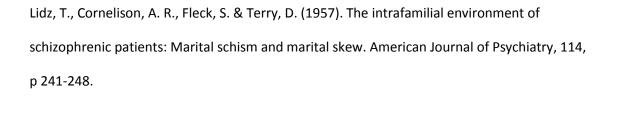
Houston, TX, Educational Psychology Department, University of Houston-University Park.

Katz, A.M. (1991). Afterwords: continuing the dialogue. In Andersen, T. (ed.) The Reflecting Team: Dialogues and Dialogues about Dialogues. New York, Norton.

King, E. (2000). The use of the self in qualitative research. In Richardson, J. T. E. (ed.) Handbook of Qualitative Research Methods for Psychology and the Social Sciences. p 175 – 188. BPS Books The British Psychological Soc

Kipnis, L. (2003). Against Love: A Polemic. Pantheon Books.





Lov om registrert partnerskap: LOV-1993-04-30-40

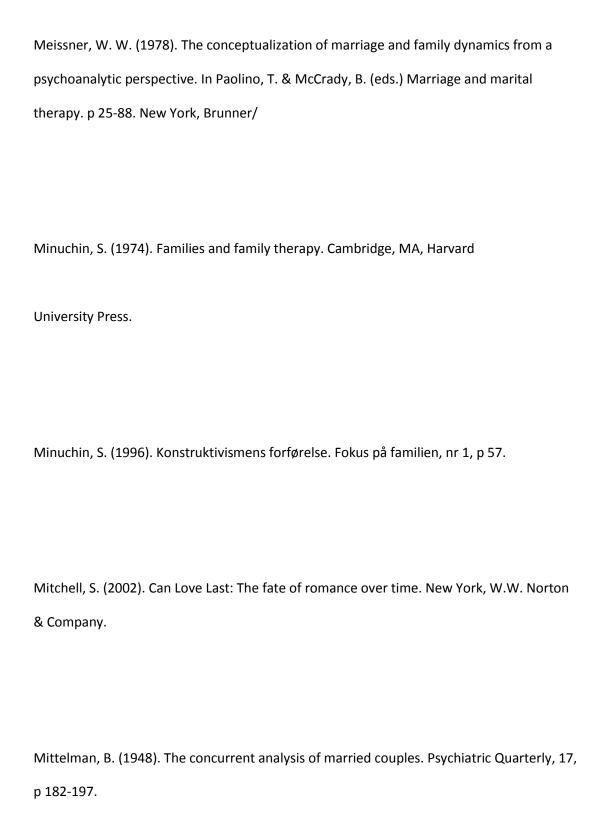
MacNaughten quoted in Willig, C. (2001). Introducing qualitative Research in Psychology.

Adventures in theory and method. Open University Press.

McNay, L. (1999). Subject, psyche and agency: the work of Judith Butler. Theory, Culture and Society, 16, p 175 – 194.

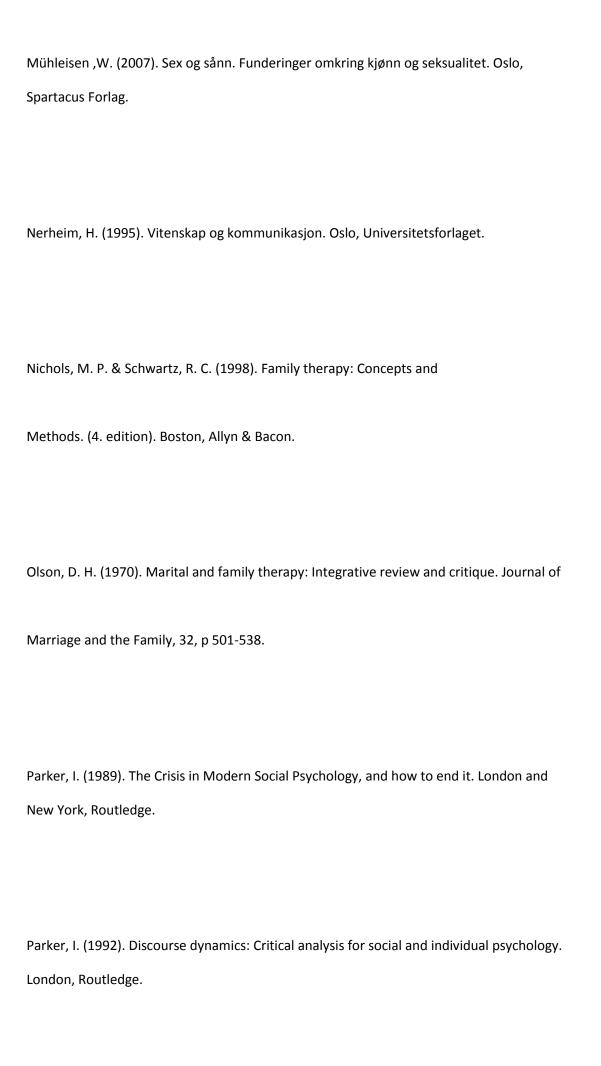
Manus, G. I. (1966). Marriage counseling: A technique in search of a theory. Journal of Marriage and the Family, 28, p 449-453.

Maturana, H. & Varela, F. (1984). The Tree of Knowledge: Biological Roots of Human Understanding. London, Shambhala.



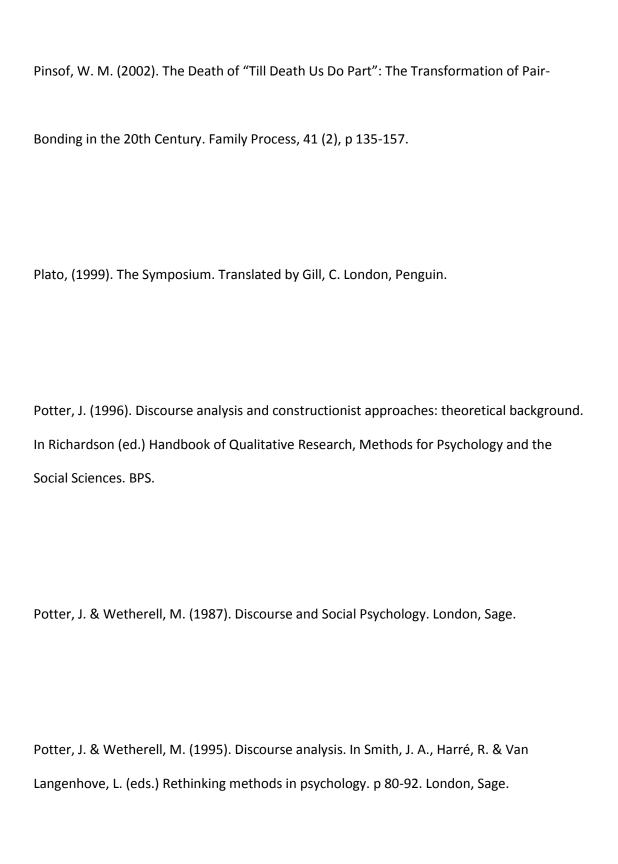
Morson, G. S. (1989). Parody, History, and Metaparody. In Morson, G. S. & Emerson, C. (eds.) Rethinking Bakhtin: Extensions and Challenges. p 63-86. Evanston, IL, Northwestern

University Press.
Morson, G. S. & Emerson, C. (1990). Mikhail Bakhtin: Creation of a Prosaic. Stanford,
Stanford University Press.
Mouffe, C. (1992). Introduction. In Mouffe, C. (ed.) Dimensions of radical democracy:
pluralism, citizenship, community. London, Verso.
Mühleisen, W. (2003). Kjønn og sex på TV. Norske medier i postfeminismens tid. Oslo, Universitetsforlaget.
Mühleisen, W. (2003). http://www.bt.no/meninger/article303635.ece. From internet 15.09.2006.



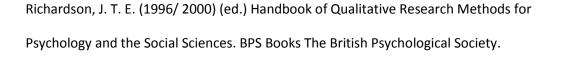
Parker, I. (1994). Reflexive research and the grounding of analysis: Social Psychology and the psy-complex. Journal of Community and Applied Psychology, 4 (4), p 239-253.
Parker, I. & Shotter, J. (eds.) (1990). Deconstructing Social Psychology. London and New York, Routledge.
Pearce, B. (1992). A "campers guide" to constructionism. Human Systems: The Journal of Systemic Consultation & Management, Vol. 3, p 139-161.
Penn, P. & Frankfurt, M. (1994). Creating a Participant Text: Writing, Multiple Voices,  Narrative Multiplicity. Family Process, 33, p 217-232.
Philips, L. & Jørgensen, M. W. (2002). Discourse Analysis as Theory and Method. Sage Publications.

Pines, A. M. (1999). Falling in Love: Why We Choose the Lovers We Choose. Routledge.



Ribbens McCarthy, J., Edwards, R. & Gillies, V. (2003). Making Families, Moral Tales of

Parenting & Step Parenting. Durham, Sociology Press.



Rober, P. (1999). The Therapist's Inner Conversation in Family Therapy Practice; Some Ideas

About the Self of the Therapist, Therapeutic Impasse, and the Process of Reflection. Family Process, 38 (2), p 209-228.

Rober, P. (2005). The therapist's self in dialogical family therapy: Some ideas about notknowing and the therapist's inner conversation. Family Process, 44, p 479–497.

Robinson, K. H. (2005). Queering gender: Heteronormativity in early childhood education. AJEC, Vol. 30 No. 2, p 19-28. University of Western Sydney.

Rogers, C. R. (1970). Carl Rogers on encounter groups. New York, Harper and Row.

Rose, N. (1989/99). Governing the Soul The Shaping of the Private self. London/NY, Free Association Books.

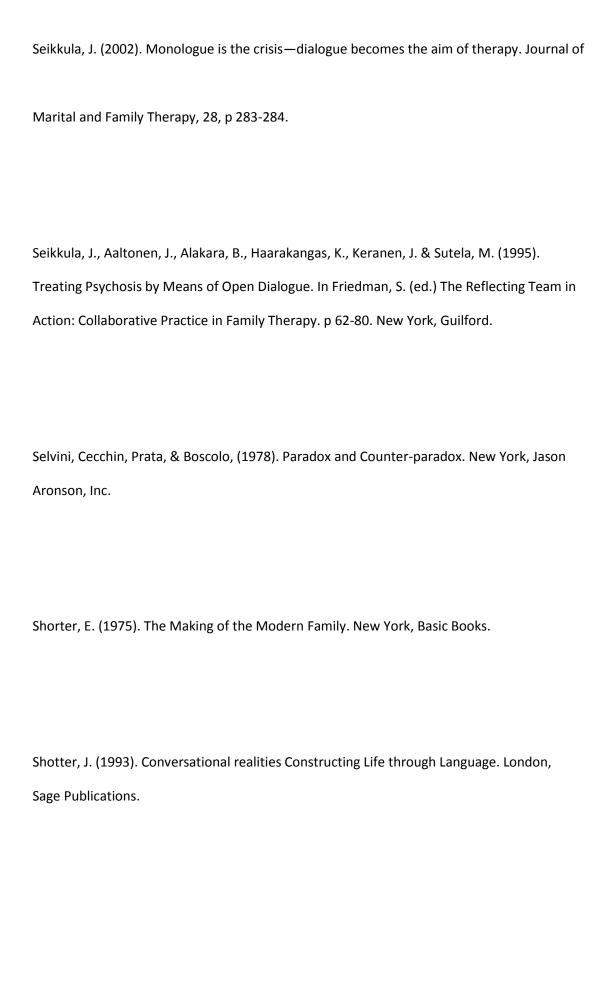
Roseneil, S. (2007). Queer Individualization: The Transformation of Personal Life in the
Early 21st Century. Published in Nora: Nordisk forening for kvinne- og kjønnsforskning /
Routledge Taylor & Francis Group.

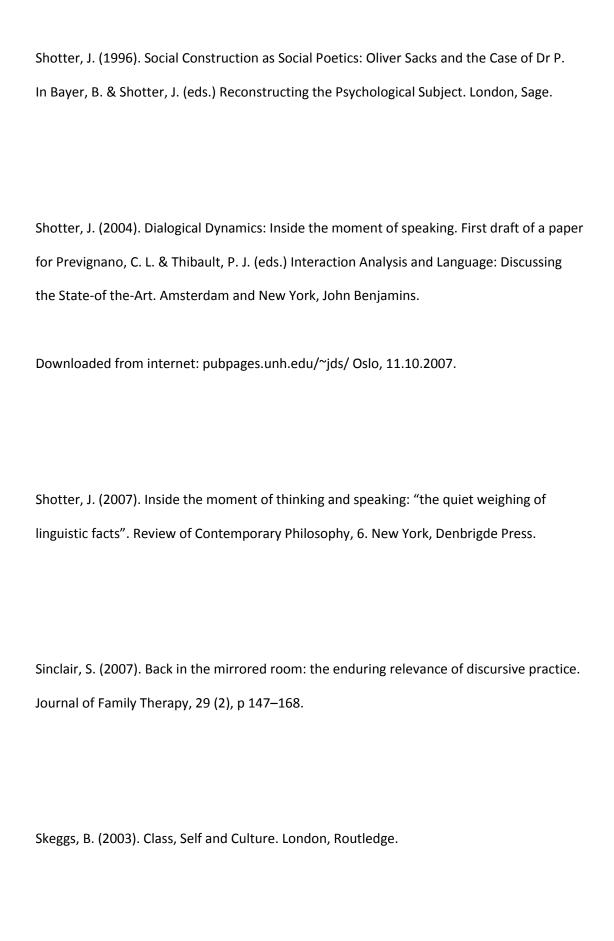
Roseneil, S. (2007). Living and loving beyond the heteronorm: A queer analysis of personal relationships in the twenty-first century. http://www.eurozine.com/articles/2007-05-29-roseneil-en.html - footNoteNUM45 . From internet 29.05.2007.

Rubin, Z. & Mitchell, C. (1976). Couples research as couples counseling: Some unintended effects of studying close relationships. American Psychologist, 31, p 17-25.

Sacks, H. (1992). Lectures on Conversation. Oxford, Blackwell.

Sacks, H., Schegloff, E. A. & Jefferson, G. (1974). A Simplest Systematic for the Organisation of Turn-Taking for Conversation. Language, 50, p 696-735.





Sloman, A. (1976). What are the aims of science? Radical Philosophy, No.13 Spring, p 7-17.

Smith.	I.A.	(1996)	Bevo	nd the	divide	hetween	cognition	and	discourse:	using
Jiiiiiii,	J	(エンンひ)	. DCyO	iu tiic	aiviac	DCLWCCII	COSTILLION	anu	discourse.	using

interpretative phenomenological analysis in health psychology. Psychology & Health, 11,

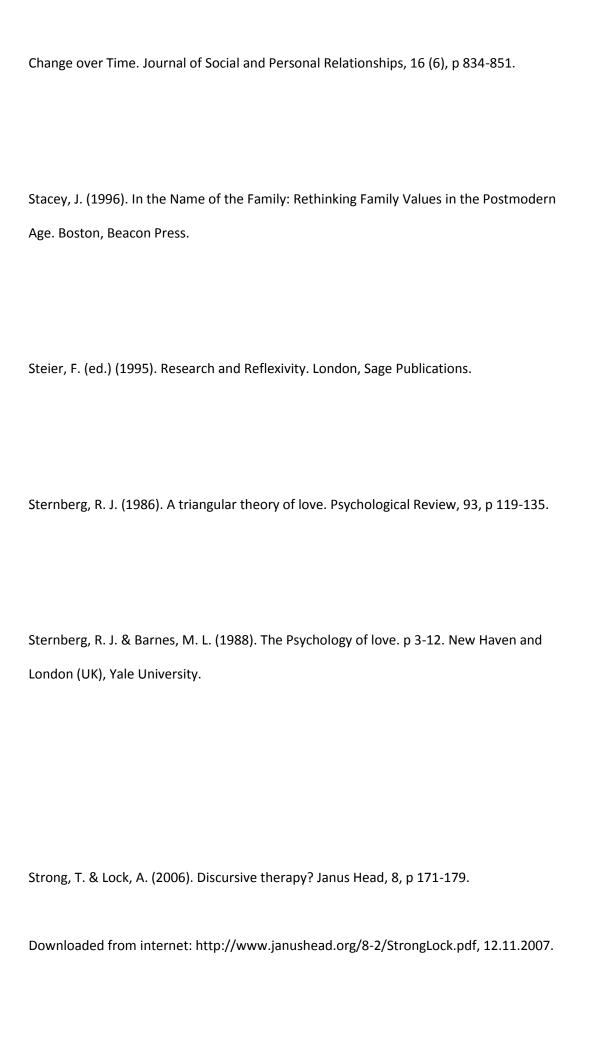
p 261-271.

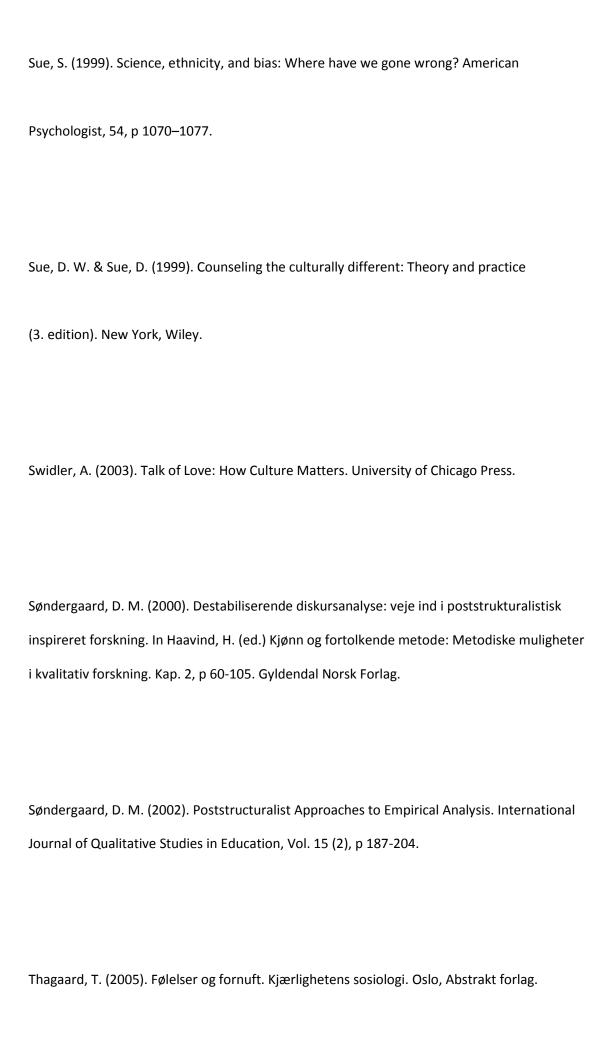
Smith, J. A. (2000). Evolving issues for qualitative psychology. In Richardson, J. T. E. (ed.) Handbook of Qualitative Research Methods for Psychology and the Social Sciences. p 189 – 202. BPS Books The British Psychological Soc

Smith, J. A., Jarman, M. & Osborn, M. (1999). Doing Interpretative Analysis. In Murray, M. & Chamberlain, K. Qualitative Health Psychology. Theories and Methods. SAGE.

Snyder, D. K. & Wills, R. M. (1989). Behavioral versus insight-oriented marital therapy: Effects on individual and interspousal functioning. Journal of Consulting and Clinical Psychology, 57, p 39-46.

Sprecher & Metts, (1999). Romantic Beliefs: Their Influence on Relationships and Patterns of





Tomm, K. (1989). Externalizing problems and internalizing personal agency. Journal of Strategic and Systemic Therapies, 8, p 16-22.

Vedeler, A. H. (2004). Do you hear me? About therapeutic listening, creating space for voices to emerge and to be heard. Dissertation, Dialogical Action Research KCC International. London, University of Luton.

Warhuus, L., Egelund, M. & Trillingsgaard, A. (1998). Systemorienteret terapi. In Hougaard, E., Diderichsen, B. & Nielsen, T. (eds.) Psykoterapiens hovedtraditioner: En indføring i psykoanalytisk, oplevelsesorienteret, kognitiv, systemorienteret og integrativ psykoterapi. København, dansk Psykologisk Forlag.

Watzlawick, P., Weakland, J. H. & Fisch, R. (1974). Change: Principles of problem formation and problem resolution. New York, Norton.

Weakland, J. H. & Fisch, R. (1992). Brief therapy—MRI style. In Budman, S. H., Hoyt, M. F. & Friedman S. (eds.) The first session in brief therapy. p 306–323. New York, Guilford Press.

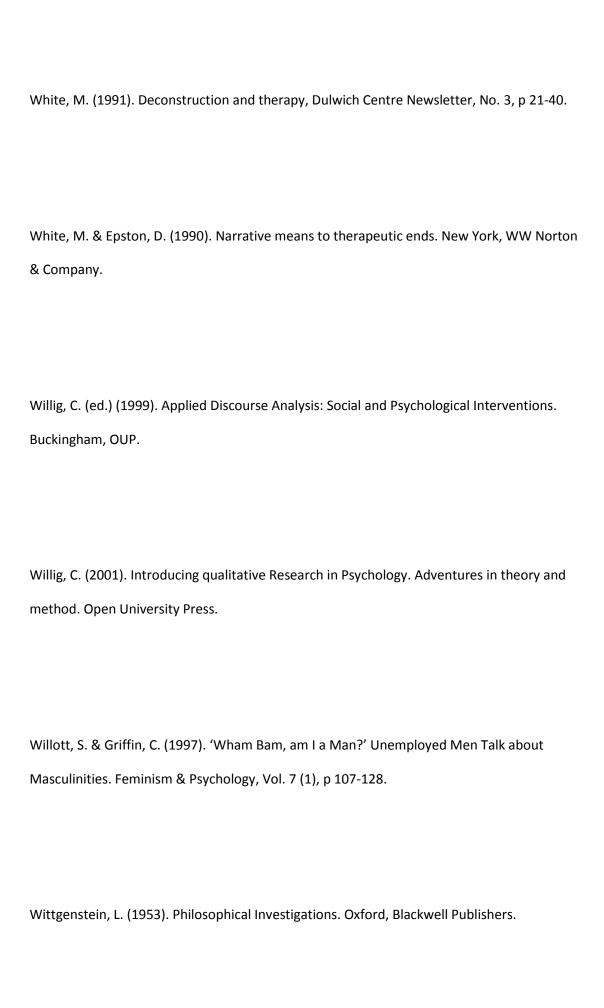
Weakland, J. H., Fisch, R., Watzlawick, P. & Bodin, A. (1974). Brief therapy: Focused problem resolution. Family Process, 13, p 141–168.

Wetherell, M. (1995). Romantic discourse and feminist analysis: interrogating investment, power and desire. In Wilkinson, S. & Kitzinger, C. (eds.) (1995). Feminism and Discourse. Psychological Perspectives. London, Sage.

Wetherell, M. (2001). Themes in Discourse Research: The Case of Diana. In Wetherell, M., Taylor, S. & Yates, S. J. Discourse Theory and Practice A reader. London, Sage Publications.

Wetherell, M. & Potter, J. (1992). Mapping the Language of Racism. Discourse and the legitimation of exploitation. London, Harvester Wheatsheaf.

Wetherell, M., Taylor, S. & Yates, S. J. (1998). Discourse Theory and Practice A reader. London, Sage Publications.



Wren, B. (2000). Patterns of thinking and communication in adolescents with an atypical gender identity organisation and their parents. Doctorate in Systemic Psychotherapy, Tavistock Clinic/University of East London.

Øfsti, A. (2002). What Ideas and Theories about Intimate Relationships are Therapists

Drawing on in Couple Therapy? Research Proposal; Doctorate Systemic Psychotherapy,

Tavistock Clinic/University of East London.

## APPENDIX 1

INFORMATION SHEET FOR RESEARCH PARTICIPANTS
Name of study
"What Ideas and Theories about Intimate Relationships are Therapists Drawing on in Couple Therapy"?
Who researcher is
Anne Øfsti; Diakonhjemmet College in Oslo.
My research project is part of my Doctorate in Systemic Psychotherapy at Tavistock Institute/ University of East
London.
Purpose of study

Despite the fact that systemic couple therapy is an established area of professional counselling, very little academic literature concerning what the content of systemic couple therapy is or might be is available. This is surprising, especially given the inherent conflicts in providing couple therapy that face all practitioners. Some of these conflicts may perhaps stem from the challenges in separating professional competence from private experiences.

I suggest there are at least three different sources of knowledge influencing applied couple therapy. The first one is the practitioners own life experience, i.e., knowledge and ideas gained through their own families, friends and relationships. The second one is the different discourses about intimacy in society conveyed by media, literature, philosophy and religion. A third source is the therapists' own professional training and reading of therapy theories.

Traditionally, research on relationship beliefs and intimate relationships has been grounded in psychoanalytically oriented therapies, attachment theory and anthropology. This research has focused on the differences between well-functioning and dysfunctional couples. Moreover, it offered a conceptual guideline for the aims of therapy and the methods to use.

Systemic theory, on the other hand, offers some concepts and ideas of what couple therapy is and should be. However, systemic theory is fragmented and lacks practical guidance for practitioners of couple therapy. Partnerships and close relationships are inherent parts of everyday life and are experienced by most adults during their lives. Conducting couple therapy with the aim of repairing or enriching relationships is a profession that challenges the therapist with respect to his or her beliefs about intimate relationships and how to make use of them in a therapeutic context. Since the general body of theory is vague and unclear, it is left to the therapist to draw the line between professional therapy models and the

therapist's own private beliefs acquired through his or her own experiences. My hypothesis is that is likely that the therapist's private beliefs are commonly utilized when conducting couple therapy. Hence, therapists probably experience a constant "covert negotiation" between private and professional ideas about intimate relationship in their mind. This dilemma will be the main issue for my research.

My research questions will be:
• What ideas are contained, both theoretical and private value laden, within systemic
couple therapy and how are these ideas shown in the therapy?
What ideas and theories about intimate relationships are therapists drawing on in
couple therapy?
How do therapists negotiate the dialogue between covert/private ideas and publicly
expressed ideas in couple therapy?
Use of tape or video recording
I am not going to video record any sessions, but the participant will be asked to record his/her
own therapy sessions and I will go through the video with the therapist for an interview with
the therapist about the therapists thinking and reflections during the therapy.

How results will be used (including publication)

My research work is part of my Doctorate in Systemic Psychotherapy at Tavistock Clinic, that is a Doctorate Dissertation. In addition I will (probably) write an article aimed for a professional journal on the basis of my Doctorate Dissertation.

What is involved for the informant

The informant will be asked to reflect her/his own practical work with couples. I am particularly interested in his/her relationship beliefs about adult, intimate couples. The participant will be encouraged to share his/her thoughts about what kind of knowledge he/she make use of in therapy and where this knowledge "comes from", both academically and from more private experiences.

The informant will be asked to go through his/her own therapy sessions with me and explore in depth what content he/she is drawing on in doing Couple Therapy.

Why you have been chosen

I am writing to you because you, at first hand, were recommended by .... has given me some information about your Family Therapy Guidance Centre and your ways of working, and this may in my view be valuable experiences in my project. However, I will need to inform you about my project in more detail, about my aims and how the study could be carried out. I therefore want to invite you to a meeting in order to discuss your possible

participation. I enclose a copy of my "research proposal" so you can have a look at my perspectives and my project plans so far.

## Confidentiality

The data I collect is to be used in a research project and the other course members (3 other students) and the 3 other staff at Tavistock Clinic in London will have access to the data that I use in my analysis.

My transcriptions (in Norwegian) will be confidential and only used as material during my
analysis (according to given rules).
To be sure that anonymity is observed, I will send a copy of my report (a rough draft) and ask
for the participants comments, among others on issues concerning anonymity, before I finally
write it out.
I will also discuss with the participants possibilities to be co-publishers with me (see The
Proposal).
Withdrawal at any stage of the research
Individual members of the group who do not wish to participate are free to stay outside the
project. Each participant might also withdraw from the project at any stage, and I will not use
material that has been given so far if they do not want me to.
Yours sincerely,

Anne Øfsti

Researcher

CONSENT FORM FOR PARTICIPANTS
Title of Project: What Ideas and Theories about Intimate Relationships are Therapists
Drawing on in Couple Therapy?
Name of Researcher Anne Øfsti, Diakonhjemmets høgskole, Oslo.
Traine of Researcher Finne protty state in general regional control of the state of
Contact Phone No: 22 45 19 57

Best times to phone: 9.00 - 10.00 in the morning (or best: e-mail:

ofsti@diakonhjemmet.no

APPENDIX 2

1. I have read and understand the information sheet and have had the opportunity
to ask questions.
2. My participation is voluntary and confidential and I am free to withdraw at any
time, without giving any reason, without my legal rights being affected.
3. I understand that any tape or video-recording made will be destroyed at the end
of the research.
4. I understand that any publication resulting from this research will not identify
me in any way.

5. I consent to the findings from this study being published, suitably anonymised.
6. I agree to take part in the above study.
Name Date Signature
Address of Informant



Consent form for couples
Title of Project: What Ideas and Theories about Intimate Relationships are Therapists  Drawing on in Couple Therapy?
Name of Researcher Anne Øfsti, Diakonhjemmets høgskole, Oslo.
Contact Phone No: 22 45 19 57
Best times to phone: 9.00 – 10.00 in the morning (or best: e-mail: ofsti@diakonhjemmet.no

APPENDIX 3

1. We have been informed about the research project in which we will be involved through our sessions will be videotaped. We have had the opportunity to ask the questions that we have concerning our case being used in the research project beforehand.

2. Our participant is voluntary and confidential and we have been free to withdraw						
at any time, without giving any reason, without our legal rights being affected.						
3. We understand that any tape or video-recording made will be destroyed at the						
end of the research.						
4. We understand that any publication resulting from this research will not identify						
our couple in any way.						
5. We consent on letting the therapists show the videotape to the researcher and						
discuss the therapy session with the researcher.						

Name of client Date Signature
Name of client Date Signature
Researcher Date Signature