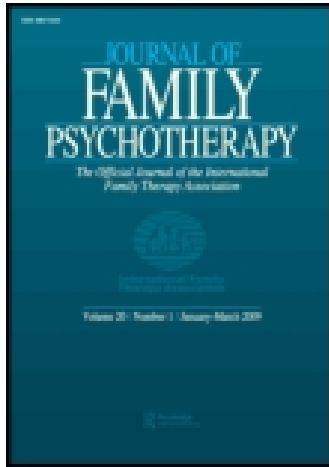


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Publisher: Routledge

Informa Ltd Registered in England and Wales Registered Number: 1072954 Registered office: Mortimer House, 37-41 Mortimer Street, London W1T 3JH, UK



Journal of Family Psychotherapy

Publication details, including instructions for authors and subscription information:

<http://www.tandfonline.com/loi/wjfp20>

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Published online: 31 Mar 2015.



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To cite this article: D. Scott Sibley, Jonathan G. Kimmes & Alexandra E. Schmidt (2015) Generating New Stories of Commitment in Couple Relationships by Utilizing the Sliding Versus Deciding Framework, *Journal of Family Psychotherapy*, 26:1, 68-73

To link to this article: <http://dx.doi.org/10.1080/08975353.2015.1002746>

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Generating New Stories of Commitment in Couple Relationships by Utilizing the Sliding Versus Deciding Framework

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*KEYWORDS commitment, couples therapy, decision-making,
externalization, narrative therapy, unique outcomes*

An ongoing conundrum faced by psychotherapists is how to help foster greater commitment in couple relationships because researchers (e.g., Surra & Hughes, 1997) have consistently identified commitment as one of the most important elements of success in romantic relationships. As Stanley and Rhoades (2009) explained, “At the root, commitment means making a decision to choose one alternative over others, and that in choosing, one is deciding to give up the other alternatives. Deciding is fundamental to commitment” (p. 35). Struggling with how to define and act upon commitment to one’s partner is a recurring theme within couples therapy, and commitment underlies presenting such problems as infidelity, intimate partner violence, substance abuse and recovery, and tension fueled by differences in child rearing strategies. Doherty (1995) even proposed that therapists have a moral obligation to challenge clients to explore what it means to be committed to their family members and to hold clients accountable for acting upon those commitments.

Jonathan G. Kimmes and Alexandra E. Schmidt contributed equally to this work and are both considered second authors.

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In recent years, one of the most influential models of commitment in romantic relationships has been the sliding versus deciding model developed by Stanley, Rhoades, and Markman (2006). Although this framework has been applied in the fields of psychology and family studies to conceptualize commitment behavior in cohabitating couples, the model also provides therapists with a pragmatic tool to help clients explore the relevance of decision-making to commitment within relationships. As described by Stanley, Rhoades, and Whitton (2010), "People slide into having sex. People slide into having children. People slide into dangerous relationships. In contrast to sliding, there are strong conceptual reasons to suggest that clear decisions generally build the most resilient intentions" (p. 253). Researchers have found that individuals who report more thoughtful decision-making processes also report less infidelity and higher satisfaction in their relationships (Owen, Rhoades, & Stanley, 2013). In the work of psychotherapy, clinicians have a duty to challenge clients to make thoughtful decisions that fit with the commitments they have made to themselves and others.

Couples create stories about their relationship associated with their commitment as a couple, and they are often able to intuitively identify how times of crisis have influenced the dynamic nature of their level of commitment to the relationship. When couples experience relational crises and lack the resources to be able to respond to these crises in a strengthening way, they may begin to develop problem-saturated stories regarding their relationship that challenge their desire to remain committed to their partner. These problem-saturated stories include messages like "Our relationship started in such an abnormal way that I'm not sure there's anything we can do to have more of a solid foundation," and "She is never happy with anything I do, so I'm just going to keep doing what I've been doing and hope that things work out." From a narrative perspective, this problem-focused approach is disempowering for the couple. They are more likely to slide into relationship transitions because their narrative as a couple is not one in which they feel like they have the competency or power to make decisions impacting themselves, their partner, and their relationship.

Therapists using the narrative approach work to create an environment supporting the agency, or decision-making capacity, of the clients. In narrative therapy, the therapist relinquishes the role of expert and partners with clients to deconstruct problem-saturated stories and open up space for re-authoring alternative stories. By asking questions that allow for new, more empowering stories to emerge, the therapist tacitly affirms partners' abilities to build upon their competencies as decision-makers. When partners see themselves as capable of making sound decisions as a couple, they are more apt to take an active role in shaping the trajectory of their relationship, as opposed to sliding through relationship transitions. Accordingly, it is important for therapists using a narrative approach to remember that, in order for

couples to fully realize their decision-making abilities, the clients must be in charge of re-authoring their own stories, not the therapist.

This intervention can be used in a variety of ways, including premarital counseling sessions, therapy with couples who define their presenting problem as vacillating between whether to continue or end the relationship, and, more broadly, with couples who appear to struggle with other kinds of decisions that influence the relationship. The intervention typically takes place in one session near the beginning of therapy, but the therapist continues to refer to the concepts of sliding and deciding in future sessions. Regardless of the therapist's primary theoretical orientation, combining the sliding versus deciding framework with narrative interventions such as externalizing the problem and identifying unique outcomes provides clinicians with a useful tool to enhance couples' commitment to being intentional within the relationship before moving forward to address specific goals for therapy.

INSTRUCTIONS

The therapist elicits the couple's story about how they first decided to be committed to each other. The therapist may ask, "How did you make the decision to become a couple?" and "What qualities did you find most attractive about your partner?" The therapist may also inquire how the couple informed others about this new committed relationship. This step provides clues about strengths and essential context for the couple's decision to create a relationship.

The therapist then introduces the concept of sliding versus deciding (Stanley et al., 2006) into the therapeutic conversation, explaining that this concept of intentional decision-making applies to multiple sectors of life, including career planning, setting boundaries with family members, and sustaining relationships with friends. Likewise, the therapist asks the clients what they will be doing in therapy to demonstrate their active decision to work hard as a couple to successfully meet their therapeutic goals and how they might know when sliding is presenting a tempting offer to detract from therapeutic progress.

The therapist asks the couple what they view as the problem preventing them from being committed to their relationship. Clients may use words like uncertainty, fear of being controlled, or mistrust. Using the clients' language, the therapist then asks how the problem (e.g., uncertainty) has influenced how they see themselves and their partner and how this has influenced decision-making within the relationship. The therapist listens for ways in which uncertainty has led to times when one or both partners have fallen into a pattern of sliding in the relationship. Instead of viewing uncertainty leading to sliding as a deficit in a particular partner, the therapist externalizes the problem as an outside force that the couple must unite together to

overcome. The therapist might ask, “How did uncertainty trick you into just going through the motions in your relationship without thinking about it too much?”

The therapist then asks questions such as “Can you tell me about a time where you made a clear decision in your relationship? Something that demonstrated a clear commitment to your partner?” to begin identifying unique outcomes. An example might be choosing to pass up an invitation to go out with friends after work to return home to have dinner with a partner. After the couple is able to identify times in which they have acted with more intentionality in their relationship, landscape of action questions can be useful in expanding upon those instances to support the restorying process (White, 1993), strengthening their narrative of themselves as agentic beings in relation to one another. The therapist’s questions should elicit facts regarding how the unique outcome came into existence. When agency is the focal point of landscape of action questions, the partners begin to “perceive their lives as a historical sequence of events in which their own decisions and actions have causal efficacy: they can do something that makes a difference” (Lee, 2004, p. 225). This helps provide couples with a glimpse of hope.

The therapist also uses landscape of identity questions to help partners determine what it was about themselves that allowed these unique outcomes to come about. In other words, the therapist challenges both partners to recognize innate qualities that they possess that have helped them to exercise their goal-directed agency. The therapist might ask a question such as, “What do you think it is about each of you that you were both able to take an active role in your decision to have another child?” The therapist refrains from labeling the clients as having certain characteristics, empowering the clients to decide what qualities they possess that helped spur them towards decisiveness. As the partners continue to see themselves as the experts in rewriting the story of their relationship, they reclaim their sense of personal and relational agency. Thus, they are more likely to engage in ongoing dialogues and conscious deliberative processes that enhance their ability to establish and achieve their goals within the relationship.

Finally, the therapist closes the intervention by reviewing how the clients have uncovered a new story about their relationship, including ways in which they have already demonstrated an active desire to be committed to their partner. The therapist might ask, “When you continue this pattern of being actively decisive to be committed to your partner, what do you think you will notice differently about your relationship in a year?” The therapist may also consider assigning a homework assignment after this session, asking each partner to write themselves a letter from their future self, detailing their successes in being committed to their partner and specific actions they took to accomplish this goal. At the end of the session, the therapist explicitly challenges/invites the couple to stop sliding and start deciding in the future

by making an active effort to demonstrate commitment to their partner on a daily basis. Clients typically respond to this intervention by recognizing very specific ways that they can improve the decision-making in their relationship and strengthening their commitment to each other by engaging in specific actions that demonstrate activity, not passivity, in their relationship.

SUGGESTIONS FOR FOLLOW UP

Combining the sliding versus deciding framework with narrative therapy techniques can create a powerful foundation for ongoing conversations during therapy about commitment in couple relationships. In future sessions, it may be beneficial for the therapist to refer back to sliding versus deciding intervention to assess for changes in commitment behavior. Some questions the therapist may consider asking couples include, “What have you done this week to be decisive and intentional in your relationship?” and “What does your story of commitment look like now, compared to when therapy first began?”

POTENTIAL CONTRAINDICATIONS FOR USE

Before beginning couples therapy and encouraging clients to act upon their commitment to their partner, it is essential to conduct a thorough assessment for intimate partner violence. It would be unwise for a therapist to promote commitment when there is a lack of physical safety in the relationship. Once safety has been established, there are few other contraindications or precautions needed for this intervention. For couples who have difficulty in identifying positive qualities in their partner or times in which they have been intentional and thoughtful in their decision-making as couple, this intervention may take more than one session.

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