

A methodological approach to couples therapy using a conjoint relational drawing process for the description of and intervention with relational patterns and meaning-attributions

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The consultants' observation and understanding of relational patterns in couples therapy is a main therapeutic objective and a resource for change. The Conjoint Relational Drawing Process (CRDP) methodology uses a drawing technique to enable the display and efficient observation of relational patterns. It was designed to address the relational process in couples therapy. Two couples participated in making a conjoint drawing that was video-recorded and later observed and analysed by the couple and the therapist and the researchers. The relational pattern descriptions and meaning attributions about the video-recorded drawings were analysed in the therapeutic and research contexts. As a result, new perspectives regarding relational patterns and meaning attributions emerged, revealing modes of interaction that allowed new viewpoints about difficulties and ways forward. This approach for the clinical application of CRDP contributed to the evaluation and intervention in the couples' therapy, and enabled issues to be defined early in the process.

Practitioner points

- CRDP is a non-verbal technique in couples therapy that enables the emergence of relational patterns
- CRDP as a dialogical process is itself a relational experience and facilitates therapeutic interventions
- CRDP facilitates couples' reflexivity about their interactions
- CRDP offers a non-blaming context for discussing anger and pain, circumventing the verbal content of conflicts

Keywords: couples therapy, drawing, process, relational pattern

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Introduction

Drawings and other artistic creations have served historically as mechanisms of communication that express both feelings and actions, and are a subject of study and practice in psychology. In psychotherapy, graphical expression has been used in a projective manner to reveal personal aspects beyond conscious control, to increase self-awareness, to share emotions and experiences with others and to define therapeutic objectives and promote change (Oster and Crone, 2004).

This article aims to assess the methodology of Conjoint Relational Drawing Process (CRDP) and its usefulness in couples psychotherapy and other relational therapies. This methodological approach in couples therapy follows a number of steps: translating the narrative of the couple's conflicts into a drawing language, negotiating different positions at an analogic level, observing their own interaction at this level and then re-translating the narrative of gestures and designs into a conceptual understanding of their problems.

Through observing the video-recorded drawing, the technique reveals relational dynamics and depicts a process of therapeutic elaboration that takes the couples through different levels of logical reflection, from a pre-verbal level to the highest level of abstraction and conceptualization.

This methodology is original and novel due to its focus on the ongoing nature of the activity rather than on static products such as the resulting design, diagnosis or test results. Its contribution for clinicians is the facilitation of better observation of relational patterns and meaning attributions within interactions during a couple's conflicts, both for the couple and for the therapeutic system.

Process, double description and abductive learning

CRDP encourages addressing relational patterns associated with the conflicts that the couple reports, circumventing the verbal content of conflicts. Drawing upon the ideas of Bateson (1982), human systems (and, therefore, couples) are seen as connected by interactional patterns that act as rules between partners within the relationship. A pattern becomes dysfunctional when it is inflexible (incapable of adaptation), reinforces homeostasis and does not adjust to evolving contexts. Distinctions made during therapy can reveal new information on emerging meanings. This reframing produces changes in the emotional experience of the interaction and contributes to rule changing, enabling the couple's growth (Bateson, 1982; Keeney, 1983).

The description of the patterns of conflict requires a double definition. Bateson (1982) proposed that the *combined observation* of two or more information sources provides knowledge *of a different logical order* than observing them separately. The human perception of distance is an example from the neurobiology of binocular vision: it is the result of the overlapping of the left and right fields of vision. Depth perception is lost when only one eye is used, as the image projected on each retina is two-dimensional. The dimension of depth is added only when images from both eyes are combined in the brain. To observe something from two perspectives is in itself an act of comparison (Bateson, 1982). This comparison requires image similitude (due to the overlap in vision from both eyes) and difference, which the brain extracts as an additional dimension of information.

The American philosopher Charles Sanders Peirce proposed *abduction* as a third type of logical inference in addition to the traditional methods of deduction and induction (Burks, 1946). Deduction moves from the universal to the singular, whereas induction moves from a collection of singular cases to the universal (Hui, Cashman and Deacon, 2010). Abduction is a creative process of new ideas, such as theories and explanatory hypotheses, generated in the scientific arena and in everyday life. Peirce meant by abduction using the term ‘musement’ or playing with no specific objective or purpose, referring at the same time to intuition and inference which implies creative insight (Aguayo, 2011; Barrena, 1996; Burks, 1946). In Bateson’s (1982) use of the concept, whenever abduction is applied it can be seen as a double or multiple description of an object, event, or sequence. In essence, abduction occurs in the presence of co-categorization based on similitude (Hui et al., 2010). It leads to broader relational systems by introducing new logical hierarchies and rules of more complex abstraction levels (see Bateson, 1982).

The concepts of patterns, double description and abduction can be applied to conflict resolution in couples therapy. The information about patterns obtained from therapeutic dialogue (verbal logical discourse), when compared to those documented in video recordings of graphical dialogue (analogical language), provides additional levels of information. This is a double description that enables abductive inference of a higher logical level, and allows couples to be reflexive to their own patterns of communication and to create new meanings. When a couple’s dysfunctional pattern constrains meanings and gridlocks conflict resolution at a certain logical level, a shift to a higher logical level will allow new meanings to emerge that alter the rules of the relationship,

and overcome false dichotomies or oppositions that are often present in conflicts.

Using drawing in therapy

Therapeutic dialogue that occurs during the shared activity of drawing helps couples to approach painful topics in less threatening ways, creates new understandings and promotes creative solutions. Graphical expression is analogic and holistic, as opposed to verbal language, which operates at a logical level with analytical and sequential processing. It has a relational logic that reveals how different parts are related and fit together (McNeill, 1992). In the field of family relations, drawings help to describe a person's internalized relationships and to understand his or her structure and roles within them (Burns, 1990; Gillespie, 1994; Malchiodi, 1998). Therapists have used relational drawing as an alternative to rational elaboration and as a stimulus for reflexive or healing experiences, without necessarily translating them into verbal language (Stein, 2007).

Relational drawing joins more than one participant in the activity of creating a picture on the same sheet of paper. This sheet of paper becomes a shared space of co-constructed objects and meanings. The co-construction is accomplished by dialogue using interactive sequences and patterns (Snir and Wiseman, 2010). In the earliest study of this technique conducted by Winnicott (1971), the therapist and patient drew together in a game-like setting to resolve issues, an imaginative approach that aided in overcoming difficulties with resistance in children (Oster and Crone, 2004). Conjoint relational drawing is commonly used in art therapy to evaluate dyadic interactions between parent and child or between members of a couple (Wadeson, 2000). In a variation of the relational drawing technique, Rober (2009) instructed each member of a couple to draw something (an object, animal or landscape) that metaphorically represented the other member, and then to draw a representation of him or herself on the same page. The analysis proposed by Rober does not examine the content of the drawing, i.e. what it represents, but rather focuses on the dialogue between them and explores the couple's conversations about what surprised them during their drawing exercise (Rober, 2009).

The relational dimension that is particularly relevant to couples therapy can be expressed through the conjoint modality of this technique where both members of the couple create a drawing simultaneously, i.e. drawing together at the same time on the same piece of paper. This

graphical relational dialogue is documented in video, allowing the therapist and couple to review the tape in order to maintain ongoing quality and accuracy when describing the interactional sequence. This method is known as the *Conjoint Relational Drawing Process* (CRDP). In addition to being a new diagnostic and interventional approach in couples therapy, it offers a different perspective that complements the information obtained in therapeutic dialogue. The comparison between graphic and verbal language generates new information (a double description, in Bateson's terms) that complements both modes of expression (Bateson, 1982; McNeill, 1992).

Through the use of CRDP, the present study aimed to identify and to describe: (1) interactional patterns; (2) meaning attributions regarding the couple's interactional patterns; (3) emotions involved; (4) strategies used to face tension during conflict; and (5) the double description of conflicts. The analysis of CRDP in couples therapy was accomplished by reviewing two clinical cases in which the results of CRDP were compared to the couple's verbal accounts and dialogue during the therapeutic encounter.

CDRP methodology

The study was carried out over the course of one year at the Faculty of Psychology of the Universidad del Desarrollo in Chile and the researchers obtained approval under the guidelines of the institutional research direction (DINV). Two therapists participated in four different cases. The therapists were contacted and invited to participate in the study, and each therapist then asked the couples to participate. The information for the study was obtained through the transcribed text of therapeutic conversations that were recorded, and through observations of the video-recorded drawing process. The procedure included the following steps: (a) describing dysfunctional patterns based on dialogue during the first two sessions (reports made by the therapist); (b) describing interactions through a group of researchers observing the video of CDRP based on an analytical protocol (three trained researchers); (c) observing and being observed during the couple's interaction via video recording of the CDRP, and reflecting upon these observations (the couple with the therapist, during the therapy session); (d) listening to recorded dialogues between the couple and the therapist about the drawing exercise and the dialogue (by the research team); and (e) establishing a dialogue with the therapist that compares the

drawing analysis based on an analytical protocol with the prior therapeutic conclusions (the therapist with a researcher) (Molina et al., 2015).

The instructions for the CRDP given by the therapist to the couple were: 'Draw together, on a single sheet of paper, the current state of your relationship. Don't try to agree in advance'. The drawing could be done at home or during a therapy session without the presence of the therapist. To interpret the CRDP, a video of the drawing session was recorded, focusing on the couple's hands in order to centre attention on interactional patterns rather than facial expressions when reviewing the video. The couple was subsequently asked to watch the video in silence and without audio. They were then asked: 'What surprised you in watching the video?' The use of the term 'surprise' aimed to emphasize novelty and trigger dialogue between partners about what they observed. The focus on the hands and the lack of audio concentrated the attention on the drawing process without being distracted by the utterances. The couple's dialogue while watching the video was audio-recorded and later analysed by a member of the research team and the therapist in order to compare it to the clinical dialogues that occurred during the initial problem co-construction sessions.

Three experts on dialogic processes evaluated a protocol of indicators of interactional qualities of the CRDP, designed by the researchers of the study. They concluded that the protocol fulfilled the criteria of identifying interactional markers during the drawing process which were appropriate for relational phenomena (e.g. the *obstruction marker* was considered when, while drawing, one person interfered with the other, generating difficulties for him or her to elaborate the graphic expression; the *being influenced* marker referred to when a partner created a drawing by copying characteristics of the design, content, shapes and colours from the other). The following protocol was used by a group of judges as a first step towards identifying relational dynamics (Figure 1). The results were compared later with the observations of the couple and the therapist regarding the CRDP.

Clinical cases

The study included heterosexual and Caucasian couples. They provided written informed consent for the use of verbal, graphical, video and audio materials for scientific purposes. In this paper two cases are presented. Their names and other general data have been changed in order to preserve their privacy.

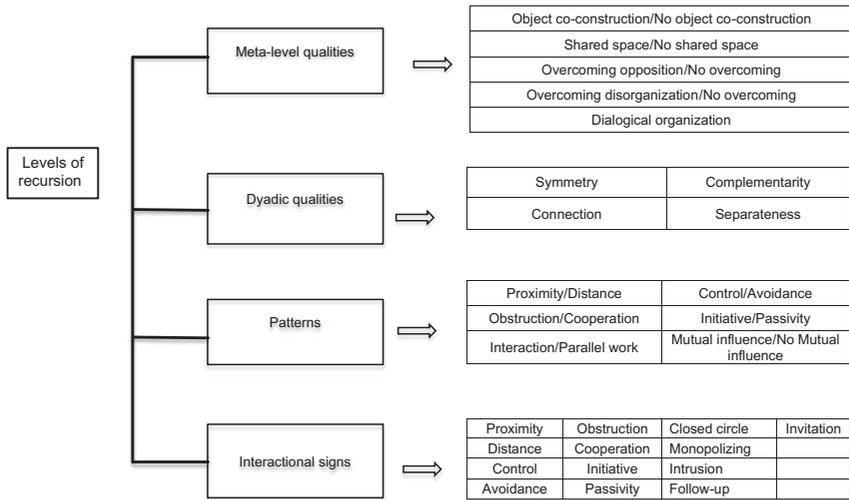


Figure 1. Protocol of relational patterns: for the observation of CRDP interactional indicators.

Case 1: Juan and María

Juan, a 38-year-old architect, and María, a 29-year-old graphic designer, a Chilean middle class couple, had lived together for two years (unmarried) and had no children. They were in therapy due to Juan’s lack of sexual desire for the past year.

The total duration of the therapy was seventeen sessions. The therapeutic approach followed a co-constructive model in which the therapist’s role involved encouraging self-reflexivity by the couple without imposing an expert view.

Session 1. The following is an extract from the first session following the therapist’s question about the motive of coming to therapy.

J: I wanted to come because I think the problem is mine.

M: But I pushed for us to come together.

J: I have a lack of sexual desire and M told me that we should come.

M: We have plans as a couple, I’m afraid that the problem is serious. I cry and he retreats inside himself.

J: I tend to have long relationships, but throughout the relationships, the desire subsides. I get bored and I end them.

M: He rejects me and doesn't seek me; I seek him. I set the stage, but at the moment of intimacy he does not stay involved.

J: I feel guilty; that initial spark, the innate desire, is not there; I see her and she doesn't excite me. I lock myself into a shell.

M: I don't know how to break through.

J: The love is great but the desire is small.

This dialogue illustrates the couple's difficulty in regulating closeness/distance (i.e. while she seeks him and searches for intimacy, he 'retreats ... locks into a shell') and the associated feelings of guilt, fear and anger (she cries and complains, and he feels guilty and loses desire). One of the researchers together with the therapist made this inference through the observation of the session. It was a repetitive dynamic that they felt would be very difficult to change. Both partners showed a positive disposition toward resolving the conflict and expressed love and affection between them. At the end of this session, the couple was asked to jointly draw a representation of the current state of their relationship at home and to videotape this activity.

Session 2. (One week later). The couple brought the completed drawing and the video recording to this session (Figure 2).

The evaluation of the drawing based on the analytical protocol – step (b) of the procedure – shows sequences in which Juan's design surrounded María's drawing for several moments, encircling it and obstructing her drawing. María drew iteratively at different moments without inviting him or letting herself be influenced. The evaluators of the protocol included control and obstruction in Juan's drawing and distance in María's drawing. This dialogue contrasted with the couple's account of their reason for seeking therapy, which was that she demanded closeness and he distanced himself (Figure 2).

The therapist and couple watched the video in silence and without audio – step ©. Each partner was then asked, 'What surprised you when seeing the video?'

J: It's a monkey sticking his tongue out.

M: You were trying to step over me ...

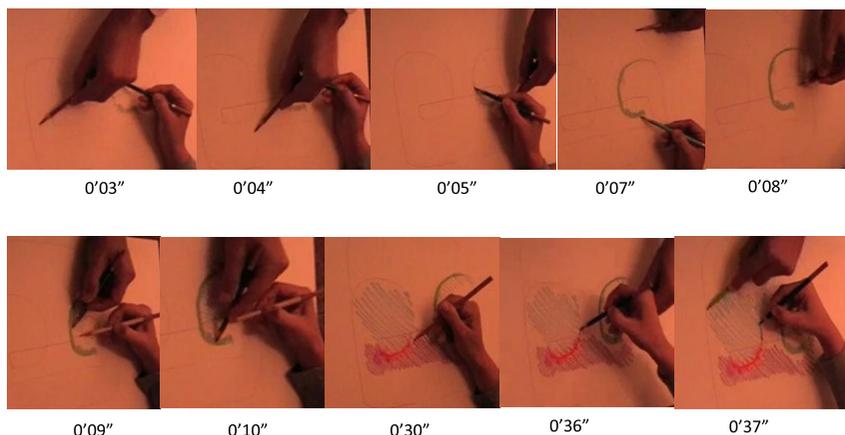


Figure 2. Sequence of interactional patterns during Juan and María's conjoint relational drawing process (CRDP).

J: With each stroke I was trying to retain the big picture and you ruined it; I was constantly watching your mistakes.

M: So when I drew, you were drawing over me ...

J: And finally we met.

M: No, rather you were following me and finally you reached me.

J: I tried to maintain what we were doing and you always got away from me.

M: I was trying to paint something that reflected myself and you didn't let me.

J: I don't like those faces; they are aggressive, crazy looking, overflowing and lacking control.

The dialogue evidenced the couple's awareness of a different pattern compared to their initial thoughts about their reasons for seeking therapy. They described how María felt that she was being followed and obstructed by Juan while she searched for disconnection while drawing. The couple and the therapist, following this new observation, were able to co-construct a double description of a pattern where Juan's

avoidant behaviour could also be understood as a strategy of control, hence a method for maintaining closeness. As for María, her demand was ambivalent, i.e. she asked for closeness but simultaneously distanced herself. This double description added complexity to the previous distinctions, introducing a new perspective to both, which also involved modifying their emotional responses. During therapy they described emotions of fear of fusion and abandonment at the same time. These were re-framed as needs for intimacy (closeness) and the legitimacy of each other (distance). The drawing patterns supporting this reframing were inferred from the couple's dialogue presented above regarding the CRDP video. Such a double description of an interactional pattern moved beyond the illusion of alternatives offered by false dichotomies, when the solution appeared to require that Juan become more intimate and María stop demanding. In its place, the double description created a recursive logic involving greater complexity, in which ambivalence of needs and fears about the couple's closeness could be observed and incorporated. The procedure enabled the partners to map meaningful tensions, revealing the ambivalence between autonomy and control that defined a blurry zone of security and abandonment.

In this case, the inclusion of this methodology provided a guide for change, revealing methods of interaction in which a new perspective about their difficulties and ways forward emerged. The couple saw their picture drawing as reflecting an important aspect of their relationship, and it provided a stimulus for a new way of thinking about their situation.

Case 2: Alberto and Claudia

Alberto, a 45-year-old businessman, and Claudia, a 41-year-old social worker, were a middle class couple who had been married for eighteen years, with five children between the ages of 5 and 16. They sought therapy due to long periods of emotional distance, which lasted for fourteen sessions.

Session 1. The following verbal exchange was extracted from the first session and related to the therapist's question about the couple's motive for trying therapy:

C: We've had long periods of distance. The children demand a lot of attention. We've gotten angrier and haven't faced it. We have a rivalry and he brings out the worst in me. I've become derogatory, discrediting and hurtful. I haven't felt validated by A.

A: We haven't been united. We used to enjoy passion and adventure, and then the kids came. We are not acting like a couple and that hurts me. I'm being passive aggressive.

C: He asks me everything; it bothers me to always be his source of information. I'm fed up with being his mom. I want him to be my partner, not to be dependent on me. Our only theme of conversation is the children. I am his connection to the children.

A: She's like a witch, like a policeman. We have a few good things: we've stayed together, we have a family, we haven't been unfaithful and we have a life plan. But I don't feel like her man; I feel shut down as a man.

C: It's been a year and a half since we've had sex. He acts very disconnected from himself. I'd like to see what is underlying our relationship.

A: I'd like us to reconnect. I don't know if we're still in love.

This first session revealed the couple's prolonged emotional and sexual distance. The relationship appeared to be divided into two exclusive alternatives: being a couple in terms of love and passion, or completely engaged in the parenting role. On the positive side, the couple was open to consultation with a therapist despite the distance and anger that they expressed. At the end of the session, the couple was asked to perform the CRDP at home and to videotape this activity

Session 2. (One week later). The couple brought their drawing and video recording to this session (Figure 3).

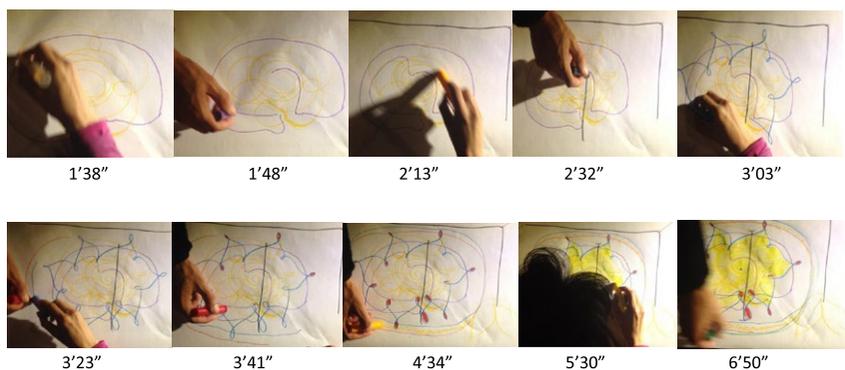


Figure 3. Sequence of interactional patterns during Alberto and Claudia's conjoint relational drawing process (CRDP).

As described in case 1, the therapist asked Alberto and Claudia what surprised them after they watched the video in silence and without audio.

A: It surprised me to see the tangled mess that C drew, not only very messy but with a sort of anger, a need to scratch and express something electric. The black line I drew, that I later kept trying to erase, surprised me. I made a well-structured frame, outside of it all, and C made a round border, unconsciously creating a flower, which I added to. Later I spent time on a circle I made and I realized I went over her green circle four or five times.

C: I was surprised that my movements were so electric. I thought for a minute that my hand was in fast-forward. I found this very strange, because I'm supposed to be the calm one while A is the electric one. I saw him making very calm movements while I was in a hurry between his strokes. He would start and I would get in the middle. I don't know, it was very strange to see this. I was the nervous and electric one and this was very surprising. I was very embarrassed by it all and I don't know why. I found it all very egocentric, as A's pencil was approaching and I was getting in his way and intercepting him.

The video demonstrated moments in which Claudia's design was made independently, with great energy and initiative, while Alberto's design was limited to encircling, structuring, and sometimes obstructing Claudia's drawing (Figure 3). During the dialogue after observing the video, she realized that the obstruction was reciprocal, and accompanied at some points by collaboration, follow up, teamwork, and object co-construction.

The comparison between the CRDP and the original thoughts regarding their motives for attending therapy, namely the progressive distancing in the couple's relationship, helped Claudia to observe the difference between the 'electric' nature of her drawing and her self-perception as a calm person. She described her attitude during the CRDP as self-centered and obstructive. Alberto compared his passive attitude in the relationship with his actions while drawing, which he described as controlling. These observations constituted double descriptions of the couple's patterns: Claudia was calm/anxious and Alberto was passive/controlling, which revealed ambivalent positions within the relationship. The application of higher-level recursive logic to overcome these initial dichotomies required a complex and circular description of this couple's relational patterns. The conflicting patterns were organized around *mutual intrusion and blocking* that rendered connection difficult. At the same time, the couple displayed resources for reconnection,

such as co-construction, teamwork, and cooperation. The CRDP thus enabled mapping of the tension of meanings between *initiative taking* and *dependency*, operating in a blurry zone between intrusion and cooperation. These meanings were reframed at therapy as expressions of the regulation of mutual self-validation.

The methodology used in the session allowed the therapist and the couple to reach a new understanding of their problems and the ways in which they were interacting together.

Discussion

The usefulness of the CRDP methodology for the description of relational patterns and meaning attributions was supported by the receptivity of the couples using it, and their new ways of thinking about their problems. It is often difficult for couples in therapy to understand the ways in which they interact. CRDP revealed relational habits in a simple format that made it easy for the couples to identify and understand the ways in which they were interacting, and the meanings attributed to those interactions. Drawing is an effective method that allows a couple to grasp the relational dimension of their sufferings, and this process allows new ways of thinking to emerge. The benefits of the methodology are tangible; for example, it reveals dysfunctional patterns and resources early in the therapeutic process while distancing negative feelings. It acts as an alternative language, for the elaboration of meaning (see Valsiner, 2008) that takes place during the therapy conversations.

The methodology supports relational dialogue through the act of drawing as a non-verbal resource and communication. People often think more in terms of entities than processes, e.g. associating actions with traits rather than part of a communicative sequence and contextual event. On the other hand, CRDP is both a dialogical process and a relational experience, which is the basic unit for couples therapy, and important for analysis and therapeutic interventions. It enables clients to become involved in process thinking (life as an ongoing matter) and participate in a reflection about their relational patterns of interaction. The dialogical, relational and processing qualities of the CRDP allow relational patterns and their meaning attributions to be displayed in the here and now of the couples' encounters. In other words, experience is generated through the act of drawing and creating meaning, new ways of understanding, and opening up new opportunities for change. The

importance attributed to the *process* is central to a therapeutic model that emphasizes pattern observation and encounter as the main dimensions of meaning elaboration and change.

This methodology provides significant advantages for the practice of couples therapy. It enables couples to approach conflict and psychological pain in a way that differs from typical arguments and counter-arguments, offering a way of approaching difficulties which are less likely to make couples feel threatened or confronted by the analysis. It arranges a non-intimidating context for discussing anger and pain.

This technique leads to complex understanding, as partners can create distance from themselves, becoming observers of their own behaviour and experiences. Through the continual juxtaposing of these observations with their current experiences, they can take a new perspective on the emotions created by the patterns and their meanings – not only their initial reactions, such as anger, but also deeper emotions, such as sadness and fear. As an alternative source of experience, CRDP enhances thinking and encourages mentalization (Allen, Fonagy and Bateman, 2008). It enables multiple views of the relational process in which couples are engaged, offering different perspectives from the accustomed attributions of problems and opening possibilities for change.

This positioning and repositioning from different perspectives adds to a couple's development of a multifaceted vision of themselves and their relationship. The couple can perceive their patterns as double descriptions of the relationship process, including any ambivalence. Among multiple explanations of conflicts constructed in therapy, each meaning has an associated counter-meaning, which offers a double description (e.g. closeness and distance). This contradiction and the dissonance it creates often leads it to be hidden by the search for coherence. Instead, opposing perspectives are integrated with the existing understandings of problematic situations to overcome false dichotomies (either/or) of the conflict.

One of the main objectives of this article was to illustrate *abductive learning* and how it enables new meaning-making in couples therapy. The method illustrates how complexity can be grasped by allowing double-description, thus encouraging change. The new understanding that was accomplished and the new information that emerged supported emotional connection and enabled new methods of tackling tensions without gridlocking conflicts.

The practice of CRDP also enables the emergence of tension in the relationship, as well as its regulating mechanisms. Difficulty and the potential for change emerge together as two inclusive opposites that

belong to a larger totality of experience. The integration of this knowledge via abductive learning allows for the emergence of novelty, adds psychological complexity, increases the couple's creativity, and helps to re-frame the conflict. Abductive learning enables the couple to adopt different positions within the couple system.

Conclusion

In this article we have examined the use of the CRDP to map and promote the depiction of relational patterns and their meaning attributions through the interactions of Latin American couples in therapy.

The use of this methodology requires therapist training, and requires the couple to have access to video-recording technology, which may affect its application in underdeveloped and isolated regions. However, these limitations can be overcome by the development of webinars for therapist training and the use of health-centre facilities, rather than the couples' homes, for drawing sessions.

The CRDP can be applied during the therapeutic process and in research. Unlike scientific approaches that seek to provide more general dogmatic statements regarding couples' interactions, the CRDP can be used from an ideographic standpoint that focuses on contingency and uniqueness rather than on general properties of phenomena (Salvatore and Valsiner, 2010). The CRDP enables couples and therapists to understand emergent processes in the here and now as an abductive method of learning new information. This technique can also be used in training, as its repetitive application during therapy becomes feedback for the couple and the therapist about the evolution of the relationship and the therapeutic goals.

In order to replicate this study and for CDRP to be used more widely, a standardized protocol will be necessary to guide therapists and evaluators in categorizing couples' drawing patterns. Through this study a format for such categorizations has been developed (Figure 1) and a protocol describing its use is the topic of an article in progress. .

Once the validation of a protocol is accomplished, it could be used not only by couples, but also by the therapeutic system as a whole in the form of triadic drawing (both partners and therapist), offering the possibility of testing triadic relational patterns within the therapeutic system. The CRDP could also be applied to different dyadic interactions, such as those between co-workers, parents and children, siblings, other family members, therapists and clients at any time point in their

relationship, and during clinical supervision. Future studies should focus on the use of CRDP for different types of relationships. It can additionally be applied in different cultures, offering an area of interest for cross-cultural studies.

The study described in this paper is the first attempt to demonstrate the efficacy of this method, which will need to be validated in therapy with a wider range of cases and an analysis of the relationship between the CRDP results and subsequent therapeutic elaboration.

This study presents the preliminary findings of the CRDP methodology as a tool for intervention, and how it contributes to the therapeutic process by redefining meanings and relations as developing in a continuous chain of experiences over time.

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