

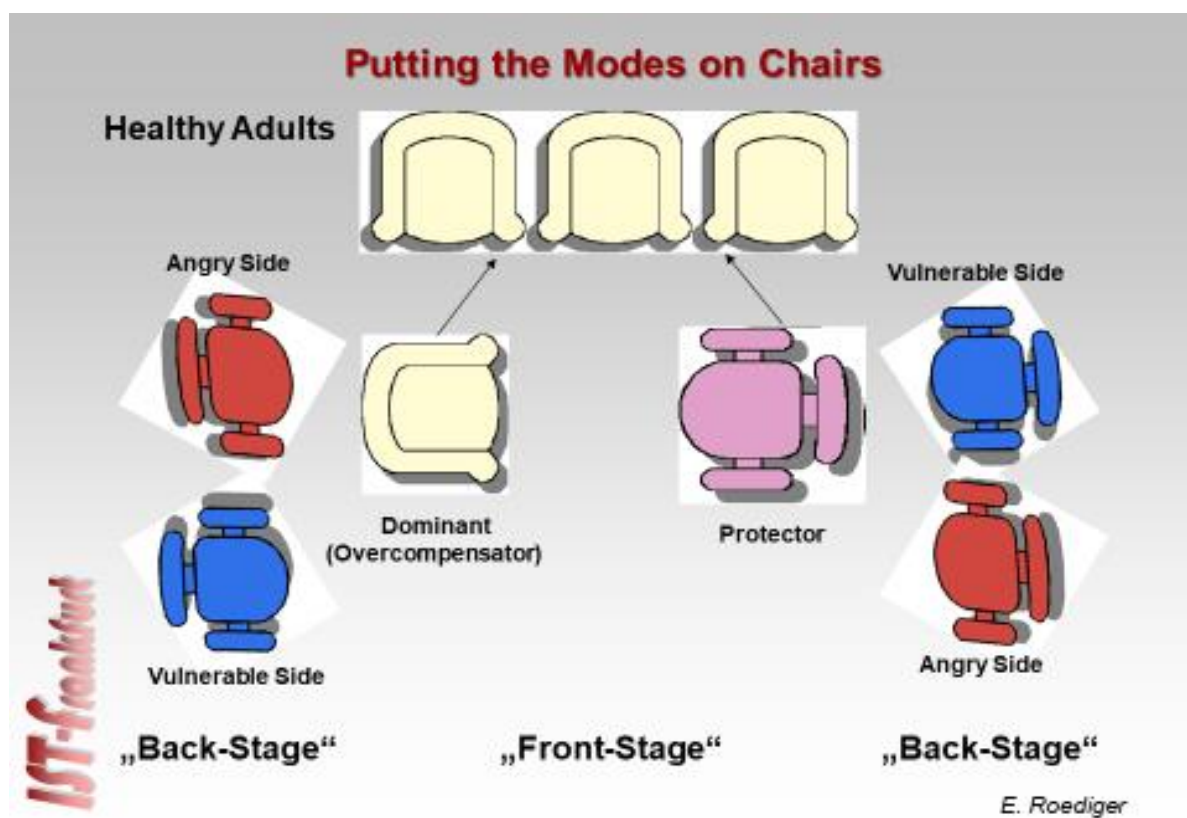
#### STC-Module 4: Rebalancing after separation – create a conjoint vision (by Eckhard Roediger)

After module 3, the couple should have managed to learn how to interrupt the cycle and separate into two different rooms. The next task is going to be getting back into a state of emotional balance. Mode cycles usually lead to disconnection from each other. Stopping a fight and going into different rooms usually helps to cool emotions down and allows the partners to reconnect with their need for attachment.

Therapist: *“After you separated into two rooms please remember what we talked about and think of our two core needs. Looking at the scene from an outsider perspective could be helpful. At best, remain standing, putting two chairs there for you and your partner. Who was on which leg when the clash started?”*

#### Identifying the active and the blocked child mode

It is important to distinguish between *anxious protectors* and *angry protectors*. The active emotion of an anxious protector is fear or sadness, maybe helplessness. They are in touch with their vulnerable child mode. The blocked child mode is the angry child side and the need for assertiveness or respect and safety. Thus this need has to be activated and strengthened. The angry protector is a passive-aggressive version of a dominant mode and thus standing on the assertiveness leg. The blocked side is the vulnerable side and the need for attachment. So they have to soften up again and shift to the attachment side (like the dominant). Finally, there are only two types of clients and two roads to take to re-balance the situation.



### **In-session work supporting rebalancing – creating a “best day” imagery**

You can support re-balancing in the sessions in the following way: Once the cycle unfolds in the session, you stop it, go into the standing-up observer position all three looking down on the chairs. You label the coping mode, the active emotion (adding this chair) and add the chair for the blocked need. Then you ask the couple to close their eyes (still in the observer position): *“Ok, we analyzed the mode cycle. For a better connection with Tom Betty needs to tip over more to the blue leg. To support this shift, I ask you to bring up an image of the “best day” you can imagine happening with Tom in the upcoming week. How do you want Tom to behave? What shall he do or not do?.....How does that make you feel in your body now? [Eventually offer the polar options of the modalities]. Ok, and what are you willing to offer him in return to encourage him acting this way?”*

After developing a general vision of the desired behavior, take the step to a **defined conjoint activity** next week: *“Fine, now we gained a general vision how you want your relationship to be. Now let’s make it real. Betty, can you give us a vision of a nice time together next week. What exactly do you want to do with Tom.....Can you see the two of you doing that?.....how does it make you feel in your body being in that situation?”* Now turning to Tom: *“Can you see the image?...Are you in the image too?....How does it make you feel in your body?.....Is there anything you want to change to make it more appealing to you?....How do you feel in your body now?”* Back to Betty: *“Betty, you heard about Tom’s suggestions. Can you basically picture going with his ideas?....What do you need to chance form your side to make it ok for you?”* Continue until you find an agreement. This becomes a homework for the next week (see below).

[You finally act like a diplomat ambulating between two conflict parties trying to get their positions closer to each other. Basically, this is the movement the couple will later learn to do themselves in the connection dialogue in Module 11. If you do not manage to create connection and it becomes obvious, that there is no sufficient overlap of interests, this is diagnostically important, because it indicates, that the therapy might end up in a “living together apart” arrangement.]

According to the steps of implementation in Module 10 the active client first addresses him- or herself to the therapist, than in direct speech from top down to the empty chair (with eyes open) and finally – after sitting down on the chairs again – to the face of the partner. In one session we usually only have time to work on the side of one client. Then we work with the other client in the following session in exactly the same way.

Well functioning couples with sufficient healthy adult modes might be able to get in touch and express a balanced wish to the partner in a functional way after re-connecting again. Others might just manage to continue every-day life in a cooled down way. If one or both partners have difficulties to get balanced you can use the chair dialogues from module 5 and 7 or the imagery exercises in module 6 and 8.

**Possible Homework assignment:** Ask the couple to get aware, which leg they are on – especially in the timeout situation. *“In the timeout, you might take a look at the MCC and ask yourself, which need got out of sight during the clash? Try to get in touch with it again. Or you might ask yourself what I would say if I were there. Try to “stand on both legs” and search balance. Standing and walking works best making use of both our legs”.*

Then try to bring up a positive image of the relationship and try to reconnect with the partner based in these warmer feelings. *“If you try to stand on both legs now... what are you actually wishing for? Bring the final purpose of your relationship into your awareness again”*. Togetherness is built on the blue leg!

**Additional homework:** Carry out the appointment you made in the session about the planned conjoint activity. Continue spending such an event together every week. Eventually offer the couple to take turns who suggests what to do.

For **working online**, it helps if you lay out all the chairs in your room so the clients get an idea about the front stage coping modes, backstage emotions and the two legs all together (RED and BLUE). You can also show the visual above are a little tablet with toy chairs. However, the **clients** only need to put **two chairs** in front of the screen for the two coping modes. To go backstage, we ask them to close their eyes and connect with the feelings in their body. To connect them with the two legs you can use the two legs they are standing on as the RED and the BLUE leg.

If you **sit** in front of the screen, you talk face to face as if sitting in the chairs talking to each other in the therapy room. When you **stand up together**, all three look at the chairs below in their room. When connecting with the backstage (inner) emotional modes all **close eyes** and connect with the body feelings. Working this way is almost as effective as working in one room together.