

Explorations

One Way to Deal with the Perils of Polytherapy: a Contract for Marital Privacy

Lorraine M. Wright*

INTRODUCTION

Couples experiencing marital difficulties will oftentimes seek ideas, opinions and advice from well-meaning family members and friends. If they also seek advice from health care professionals, religious leaders, and/or work associates they can become overdosed by the quality and quantity of advice. I have chosen to call this phenomenon of obtaining multiple advice "polytherapy". To further complicate this phenomenon, marital partners will often seek advice-givers individually rather than as a couple, in order to obtain support and/or validation for their point of view. Polytherapy creates additional problems by constraining and inhibiting couples' own initiatives and creativity to solve problems. It has been my observation that when couples do not have sufficient opportunity to be a "team" in solving and/or resolving problems, they find themselves distancing from one another. They become opposed to one another in solving problems rather than united. To deal with the perils and problems of polytherapy, I have found it useful to design a contract which draws a boundary around the couple to *unite* them in dealing with problems.

CONTEXT OF TREATMENT

The particular context for treatment is the Family Nursing Unit (FNU), University of Calgary (Wright, Watson & Bell, 1990). The FNU is an educational and research unit established in 1982 for the interactional study and treatment of families with health problems. Dr. Wendy L. Watson, Education Coordinator, Dr. Janice M. Bell, Research Coordinator and I have worked as a clinical research team for eight years, with a deep commitment to understanding and assisting families experiencing difficulties with physical and mental health problems. We conceptualise families as a group of individuals who are bound by strong emotional ties, a sense of belonging and who co-evolve an ecology of beliefs. Discovering the family's beliefs about a problem provides us with an understanding of that which organises family behaviour. We believe that a family's or individual's problematic/constraining beliefs inhibit their ability to solve their own problems. Thus, our clinical research has been dedicated to seeking and discovering innovative interventions that will encourage alternate beliefs about problems. Changing problematic/constraining beliefs opens a wider tange of solution options (Watson, 1987; Watson & Bell, 1990; Watson & Nanchoff-Glatt, 1990; Wright, Bell & Rock,

1989; Wright, Miller & Nelson, 1985; Wright & Watson, 1988).

CASE EXAMPLE UTILISING CONTRACT FOR MARITAL PRIVACY

Larry, aged 45 years and Julie, aged 42, referred themselves to the Family Nursing Unit (FNU) stating they were experiencing marital conflict. Julie had also been experiencing depression for the past 2½ years. The couple had seven children ranging in age from 6-18 years.

One of my graduate students conducted the interview while I provided the supervision. Other graduate students also observed and participated as team members behind a one-way mirror. In the first session, the couple's beliefs about their problems and previous treatments were explored. It quickly became apparent that this couple were suffering from polytherapy. Many friends, extended family members, health care professionals, religious leaders and work associates had been offering advice to the couple regarding their difficulties. As well, Julie frequently threatened to discuss their problems with the Bishop of their Church and Larry would threaten to discuss their problems with Julie's sister and brother-in-law. At times, these threats had been carried out. Polytherapy had created unneeded and unwanted additional problems for this couple.

At the end of the first session, the notion of polytherapy was introduced with them. Our clinical team explained to Larry and Julie that one way to deal with the polytherapy problem would be to have a contract for marital privacy i.e. they would not discuss difficulties in their marital relationship with anyone but each other and members of our clinical team. They were asked to spend the next week thinking about the implications for a contract for marital privacy and some of the potential obstacles that might arise if they were to sign such a contract. Both Julie and Larry were very intrigued and curious about the idea of a contract for commitment to marital privacy. We told them that we would have the contract ready for them to review at the next session.

Our clinical team hoped that just by considering the contract for marital privacy, it would perturb and challenge this couple's belief system regarding the inclusion of so many persons in their marital relationship. Larry and Julie

^{*}Director, Family Nursing Unit; Professor, Faculty of Nursing, University of Calgary, 2500 University Dr. NW, Calgary, Alberta, Canada T2N 1N4.

returned to the second session reporting there had been no arguments between them this past week. They also reported that they had both made a conscious effort not to say derogatory comments to each other. Surprisingly, Larry reported that he had the idea of talking to his sister-in-law (Julie's sister) about some difficulties but restrained himself. Once he controlled the impulse to talk to his sister-in-law he found himself wanting instead to talk to Julie. The couple discussed the pros and cons of the contract. It was quite impressive to listen to them elaborate on the advantages they perceived in such a contract. They believed the main advantage in having a contract would be to utilise each other as a resource to solve problems rather than to perceive the other as an antagonist. They both agreed that the numerous ideas and advice from so many had become very confusing. particularly when there was no common consensus to the advice. Larry and Julie also agreed that it would be difficult to resist the impulse to "run" to others for validation of their perceived victimisation and for advice on how to retaliate. However, they had already experienced decreasing the perils of polytherapy and the positive results that had occurred in only one week. At that point, we asked if they were ready to read the contract. They eagerly answered yes and read the contract in all sincerity and seriousness. The contract read as follows:

CONTRACT FOR COMMITMENT TO MARITAL PRIVACY

This is a contract for Commitment to Marital Privacy of me, (first partner), and me, (second partner), of the City of Calgary, in the Province of Alberta.

While attending sessions at the Family Nursing Unit:

1. We hereby commit to the following:

Discussion of ourselves as individuals, our marital relationship, and our sessions at the Family Nursing Unit, is deemed private. Discussion regarding these private domains, either positive or negative, will be limited to the following individuals:

(first partner)

Dr Lorraine M. Wright

(second partner)

other members of the clinical

team

2. We hereby *revoke* the privilege of discussing each other as individuals, our marital relationship and the sessions at the Family Nursing Unit with the following individuals:

Family Members

Mother-in-law Father-in-law

Sisters-in-law Brothers-in-law

Father Mother Brothers Sisters Nieces Nephews Children

Aunts

Uncles All others deemed "family"

Church Members or Authorities

The Bishop

Any other church authorities or church members

Health Professionals

Family Physician (named)

Psychiatrist (named)

Drug Counselling Centre (where eldest son was a resident)

Nurses

Psychologists Social Workers

Any other health care professionals

Friends and Neighbours

All friends

All acquaintances

Friends who are as close as family members

Work Associates

Clients

Hairdressers

Barbers

Store Clerks

Anyone else whom you may encounter that might tempt you to discuss your marital situation, each other or what is going on in the sessions at the Family Nursing Unit.

3. We hereby declare that we will not *threaten* to discuss each other as individuals, our marital relationship and/or sessions at the Family Nursing Unit with the following individuals:

Family Members

Mother-in-law

Sisters-in-law

Father-in-law

Brothers-in-law

Mother Father Brothers Nieces Nephews Children Aunts

Sisters Aun Uncles All

All others deemed "family"

Church Members or Authorities

The Bishop

Any other church authorities or church members

Health Professionals

Family Physician (named)

Psychiatrist (named)

Drug Counselling Centre (eldest son was a resident)

Nurses

Psychologists

Social Workers

Any other health care professionals

Friends and Neighbours

All friends

All acquaintances

Friends who are as close as family members

Work Associates

Clients

Hairdressers

Barbers

Store Clerks

Anyone else whom you may encounter that might tempt you to discuss your marital situation, each other or what is going on in the session at the Family Nursing Unit.

4. We understand the danger of polytherapy in our lives at this point in time. Polytherapy is multiple levels of advice differing in quality and quantity. Multiple levels of advice originate from professionals and non-professionals. This latter group may include well-meaning family members, friends and lay-people. Unexpected interactions involving information, advice and the individuals involved, make polytherapy a complex, if not impossible, therapy to monitor.

Consequently, we hereby acknowledge this Contract for Commitment to Marital Privacy as being a therapeutic injunction against polytherapy.

IN WITNESS WHEREOF, I the said first partner, and I, the said (SECONI partner, have set our hands this A.D. 19	PARTNER), the second
Name	(graduate student)
Name	Dr. Lorraine Wright
Witness	

SUMMARY

This contract had a profound effect on the couple. For the first time in the past three years, they found themselves discussing their sensitive, unclarified issues with each other rather than with numerous others. In so doing, they were able to "kick" polytherapy out of their lives. In a follow-up phone call to the family, Larry spontaneously reported that "the contract really helped. We stopped talking behind each other's back — before I was always worried what others were advising my wife. Now we advise each other. Our marriage has improved 6200%! Best the marriage has been in 20 years!"

Polytherapy runs rampant when we adopt our society's belief about the desirability of opening ourselves to the

advice of others. But whose advice and how much and how often? And what if there's differing advice? And what if the advice for relationship problems is sought individually? Does it further divide or unite a couple? We have found the use of a contract for marital privacy one effective means of assisting couples to deal with the perils of polytherapy and subsequently to regain their confidence in their own advice-giving in solving/resolving problems.

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