Couple Therapy for People with Intellectual Disabilities: A Positive Treatment Model!

J. Dale Munro
MSW, RSW, FAAIDD
Regional Support Associates
London, Ontario, Canada
dmunro@wgh.on.ca

5 Target Audiences
- Front-line professionals
- Managers & supervisors
- Clinicians/Family therapists
- Family members
- Couples

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Psychotherapy for Individuals with Intellectual Disabilities (In press)

BELIEFS
- Love + work ➔ cornerstone of happiness
- Romantics
- Not easy!!!
- Hygiene, etiquette & clothing….
- A Spark!!!
- “The true test…”
- Exciting/Frustrating
- Can teach valuable lessons!

Teenagers/Adults with Intellectual Disabilities
- Often dream about:
  ➔ Finding love
  ➔ Moving in together
  ➔ Getting married
  ➔ Having children
- “There ain’t no cure for love!”
**Historically Resistance to People with I.D. Becoming Companions, Living Together or Marrying**

- Fears about procreating/“contaminating the gene pool”.
- Legal restrictions on marriage.
- Eugenic laws (1890-1920) led to forced sterilizations.
- Institutional admissions to keep genders apart (including cemeteries).
- **BUT IN THE 1960s, ATTITUDES STARTED TO CHANGE!**

**What is a Couple?**

- Two people closely associated, bonded or paired with each other.
- At least one of whom is (moderately or mildly) intellectually disabled.
- A man and a woman – or same-sex relationship – involving two people engaged, married, living together or in a committed love relationship.
- Sometimes other configurations of two (e.g., parent & child living together, two roommates, parents of disabled, etc.).

**LITERATURE/RESEARCH**

- **Jastak et al (1963) → Delaware**
  - Marital success similar to general population
- **Medora Bass (1964) → (U.S.)**
  - (1940s-1960s) Marriage OK, but no kids
- **Janet Mattinson (1973) → (England)**
  - 36 former institutionalized
  - Majority happier than when single
  - Helped each other re: weaknesses/Didn't expect much
  - Wanted to prove institution wrong
- **Hall (1974) → (US) 15 studies early as 1920s.**
  - People w/ ID often had successful marriages

- **Floor, Baxter et al. (1975) → (U.S.)**
  - 234 former institutionalized
  - 80 married/56% separated
  - Better if one is average IQ/Single had more problems
  - Married shared more personal/relational/legal problems
  - Help/Budgeting, sex ed., etc., advocacy, health
- **Ann/Mike Craft (1976, 1979) → (Wales)**
  - 25 marriages = 45 marriages
  - BETTER SUCCESS THAN AVERAGE POP!!
  - Unrealistic
  - Companionship overcomes loneliness
- **Munro (1977) → marriage most important, next to finding job**

- **Andron & Sturm (1973) → UCLA: 2/3 happy**
- **Koller, Richardson & Katz (1988) → British City**
  - Age: 22 comparison
  - Disabled less likely to evaluate their marriage as “bad”.
  - Unrealistic
  - 1/2 marriages going well.
  - Financial, unemployment & sexual difficulties.
- **Ivan Brown (2003) → Quality of Life Research**
  - 6% who listed spouse or special person as source of support
  - Physical support: 26% in independent living
  - Emotional support: 37% in independent living
- **Kempton & Kahn (1991)**
  - Same chance of divorcing as nondisabled
  - Preferred marriage over single life.
Our Society

Marriage

- Only fully accepted vehicle for parenthood & sexual expression (e.g., gay marriage advocates).
- Important developmental milestone
  - Admission to adulthood & competency as a sexual person

Married People

Tend to:
- Have better physical/mental health
  - [Waite & Gallagher, The Case for Marriage]
- Benefit from companionship/overcomes loneliness.
- Have extended social networks.
- Nurture each other.
- Meet partner’s intimacy needs.
- Compensate for weaknesses in partner.

The Art of Loving

[Erich Fromm, 1956]

- Love is an art: & if we want to learn how to love, we must proceed as with learning any other art, say music, painting, carpentry or medicine.
- Love does not mean the absence of conflict. But conflict between two people is experienced on a deeper level...It leads to catharsis.
- To master...like any other art, requires discipline, concentration, patience, listening, faith or reliability, courage & humility.

Positive Support-Couple Therapy Model

- Little literature on couple therapy & support for people w/ I.D.
- Couples/Families report difficulties in finding therapists.
- “PSCT Model” combines established couple approaches, w/ strategies that recognize the complexity of couples w/ I.D. & their support systems.
- Helpful where close collaboration needed among the couple, extended family & services.

By Proposing this Model

↓

I wish to make a strong case for experienced therapists to become more comfortable working with couples with I.D.!
**Therapists Must Be “Unconditionally Constructive”**

- Rationality
- Understanding
- Good communication
- Reliability
- Noncoercive modes of influence
- Acceptance

*Fisher & Brown (1988) Getting Together: Building Relationships As We Negotiate*

**Strength-based/Positive Psychology Perspective**

- Positive focus on what's right, rather than wrong with couple, their family & agencies!
- Professional shows high level of energy, unflappable optimism, knowledge of resources, persuasiveness, humour & patience!
- Change occurs when strengths supported
- People are resilient – able to be bound from tragedy.
- Couple-driven outcomes, emphasizing self-determination & pursuit of couple's dreams!

**“Narrative Therapy” Concepts**

- Life stories often problem saturated.
- Affects of dominant culture on life story (e.g., disempowerment with disability label)
- Reframe and recompose “the truth” about one's life story.
- Focus on unique outcomes, preferred story, sparkling moments
- Increases self-esteem & couple pride.

*White & Epston*

**Building a Relationship**

- Casual ‘small Talk’
- Empathic Listening
- Sharing a Coffee
- Using Humour & Simple kindness!

**4 Possible Roles for Couple Therapist**

- Consultant - advice to other couple therapists, agencies, clergy or family members.
- Mediator - impartial third party who helps resolve disputes among couple, family & agencies.
- Traditional couple therapist/ Agency staff as co-therapist!
- Individual therapist, or refer to more appropriate professional.

**Assessment**

- Couple
- Extended Family
- Service System

- Thorough History
- Listen with 3rd Ear
- Sensitivity to cultural/religious
- Hypotheses (continually update)
- “What outcome...?”

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**Relationship Options**
- ‘Going Out’ as boyfriend or girlfriend
- Marriage (with or w/o children)
- Religious Ceremony to celebrate love w/o signing a marriage certificate.
- ‘Common-Law’ Relationship.
- Long-term Sexual & Intimate Relationship, but living apart.
- ‘Platonic relationship w/ someone who is more special than a friend’
- Breaking-up, separation & divorce.
- Imaginary friends or fantasies.
- Single life

**Intervening: Couple, Family, System**
- Separate sessions with family
  - Couple often wants their approval
- Strategic use of (well-timed & appropriate) humour, frankness, cheerleading, inspirational or motivational talks.
- Couple-Centered Planning Meetings – e.g., increasing support network.
- Reassurance/Five Critical Questions

**Reassuring Families/Five Critical Questions**
- Is my relative physically & emotionally safe in this relationship?
- Is my relative really happy with this partner?
- Are money management, daily living & health needs going to be properly met?
- Is reliable birth control in place?
- Are they receiving enough agency support?

**To Parent or Not to Parent!?**
- PSCT Model neither encourages or discourages pregnancy/parenthood.
- Research shows many parents with I.D. can learn parenting skills (Amos & Feldman, 2005).
- Couples seeking counselling re: having kids should be fully informed about responsibilities, challenges awaiting parents.
- If suspicions about child neglect/abuse, consult with child protection agency (CAS).

**Private Couple Sessions: What Therapists Need to Know!**
**Private Couple Counselling Sessions**
- Appear to be systemic biases!
- Private sessions important part of Model.
- Reinforces notion relationship is important!
- Often 6-12 sessions, every 2-3 weeks, later augmented w/ occasional “booster sessions”.

**Active listening** ➔ powerful!
- careful note taking

- Learn to clarify, label & channel intense feelings
- “Make sessions fun/half the work is done!”

**Interviews in private office.**

- Frequent repetition ...clinical impressions & advice (quieter, slower, clearer, more succinct, request eye contact)

- Use language used by couple
- Role-play

**Role Play & Beh. Rehearsal**
- Repetition ➔
- Often love it!

**Meeting the inlaws**

- Saying “No” to:
  - visits from relatives
  - sexual advances

- Coping w/ domineering people

**Better Management of Anger + Jealousy**

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Why Can’t You Shut Up?
Anthony Wolfe
Disengage!
“Two Minute Rule”

Teach Rules for Fair Fighting
(Bach & Goldberg)
- No physical hurting or violence
- “Here & now”
- Avoid global terms ➔ level specific concerns
- Win-Win
- Make appointments to fight
- Don’t hit below psychological “belt-line”
- Admit you’re both to blame
- Handicaps given to lightweight fighter.

*People with ID often love rules (clear, concrete)!

Identifying
“Cognitive Distortions”
“Ways Your Thoughts Play Tricks on You!”
(Munro 2010, in press)

“Cognitive Distortions”
- All or nothing thinking*
- Overgeneralization
- Mental Filter
- Discounting the positive
- Jumping to conclusions –mind reading
  - fortune teller
- Catastrophizing*
- Emotional reasoning
- Should statements*
- Labelling*
- Personalization & blame

“Reframing”
Teach re-thinking, change one’s perception of a person or situation, in a less emotional, more constructive & rational manner (e.g., “depressed”, rather than “lazy”; “wise” rather than “stupid”; diabetes as “an advantage”, anxious for “controlling”, “good parents”).

➔ People learn to pass it on!
**Education re: Sexuality, health & hygiene, & Dealing with Sexual Dysfunction**
- Dealing with myths
- Masturbation
- Sensate focus
- Viagra

**Making**
“Behavioural Requests”

**Encourage**
“Complementary Behavior”

**Instruct Couple**
Effective Boundary-Setting
- Inlaws
- ‘Bad’ people
- Fitness
- Special Olympics
- Circles Program
- Violence
DIRECT COUPLE TO HAVE MORE
FUN!!!

Cheap Dates/Vacations

Creative, Practical Approaches

- e.g., sing strategies, read sections from self-help books, visual & augmentative communication

Psychiatric Assessment

- Marg (33, Down Syndrome), John (35, ID)
- Talking seriously of marriage
- Mother requested couple counselling
- Complemented other’s limitation.
- Arranged session with parents (dad was hostile re: John).
- Brother threatened lawsuit/Mom intervened.
- STOP/THINK/GO
- Marriage preparation.
- Postponed wedding for a year.
- Reframing (“nice guy”, “concerned parent”)
- Couple-centred planning meetings.
- Psychiatric consult/medication
- Walked down the aisle/TEN YEARS!

John + Margaret

J. Dale Munro 2010
**What Couples with ID can Teach Us!**

**Value of...**
- Companionship
- Lowering your expectations
- Realizing anyone can be beautiful & desirable
- Seeing that money isn’t needed for happiness
- Loyalty & gentleness
- Compensating for each other’s weaknesses

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**Family Triangles**

- Smallest stable unit of relationship is 3.
- When 2 people unable to resolve problem, tendency to include 3rd person (e.g., affair, interfering inlaw, child).
- Stabilizes relationships,... but also freezes conflict in place.
- Most problems that bring families into counselling turn out to be triangular.

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**IN CONCLUSION**

- Love relationships for couples w/ ID can be very “successful”!
- We still need more...
  - Clinical literature
  - Research re: methods/models of couple therapy.
  - Therapists expand practice to this under-serviced population

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**Prognosis?**

- Successful
- Happy

- No violence/Not overly controlling
- Stand up to family disapproval
- Commitment, sexual fidelity
- Compatibility w/ sexual expression/values
- Positive family & system support/modelling
- Adequate agency & professional support
- IQ & adaptive behavior in mild range
- Regular expressions of kindness, respect, concern for partner.
- Willingness to go for counselling
- Couple teamwork to weather “rough times”

- Common interest & values (Tim’s)
- Good daily living skills
- Complementary skills
- Separate/shared activities
- Resolved issues re: b.c., parenting, kids
- Have fun! Enjoy spending time together
- No history of severe, untreated M.I.
- A ‘spark’
- Significant courtship before marriage/moving in together
- Premarital counselling & marriage preparation
- Successful financial management
Premarital Preparation

- SCCT Model recommends this.
- Consultant Vs. Therapist/Teacher

1. Individual-Conjoint Counselling

2. Group Marriage Preparation
   - Best if familiar faith group or agency.

Munro

“Three Year Rule”

- Must go out for at least three years, before you marry or live commonlaw.
- Applies to both people who are disabled & nondisabled!

Key Variable

Are the partners willing to stand up to their own families?

Ethics of Couple Decision-making

- Self-determination
- Personal Choice
- Human Rights
- Pleasure seeking
- Empowerment
- Dignity of Risk
- Social Role Valorization

- Full Responsibility
- Health & Safety
- Non-violence
- Respect for the Law
- Emotional Stability
- Rights of Others
- Informed Consent

Classic Couple Difficulties

- Abuse of alcohol/drugs
- Demand unsafe/unprotected sex
- Misuse of power/Violence
- Neglect or mistreatment of children
- Suicidal or dangerous attention-seeking
- Property destruction or hygiene complaints
- Chronically overspent/Serious financial difficulties (e.g., sex lines, cars, etc.)