The Plenary Address

The Agony and the Ecstasy in Couple Work

Couple work can be both wonderful and difficult. What makes it wonderful for the practitioner? What makes it difficult? How do we as practitioners employ our clinical knowledge and experience in the face of couple work that is difficult or problematic? How do we use ourselves personally and professionally?

In this plenary address, I want to explore the agony and ecstasy of couple work. I want to look inside couple sessions and unpack what happens using the lens of the Emotionally Focused approach to individual and couple work. What triggers our personal reactions? How do we hold them? How do our personal reactions influence the sessions? By exploring and considering what happens to practitioners, I hope to provide some glimpses of our inner workings in how we decide to respond and intervene. By reflecting on our professional practice I hope to explore what happens to us as practitioners and how we can achieve positive results in both the interpersonal and intrapersonal domains. Finally, I want to playfully employ the metaphor of the Michelangelo phenomenon to consider how all the players in couple work influence each other in the development of their ideal selves.
Thank you. It is a great honour to be standing here today before you. I regard it as an wonderful opportunity to speak with all of you about couple work, a topic that is very dear to my heart. My love of couple work was sparked initially when I did some couple and family work in my position as a District Officer with the Department of Youth and Community Services in the late seventies. I then had the opportunity to join the Marriage Guidance Council of NSW, now known as Relationships Australia, and do some serious work with couples. What I mean by serious work is that I was able to schedule regular appointments to see couples. Every couple had the opportunity to continue until the work was finished whether it be ten sessions or fifty. This then continued in the late eighties when I moved into private practice where I have been able to continue to develop and to explore my understanding and practice of working of couples. Then my work moved into long-term couple work where couples could see me anywhere from fifty sessions onwards.

The invitation to participate in this symposium came in April last year when Eric Hudson asked me about my interest in being included in the program on the matter of diversity. I responded saying that if I had something to say specifically on diversity that fitted their program that I would like to be included. However I was really thinking about working with couples who were emotionally unwell. I was interested in and also working with couples who had traumatic backgrounds or personality disorders that revealed itself in reactions such as being split-off, seriously unavailable to their partner, or un-empathic to self. Eric came back to me and said that my interests were complementary with the symposium. That was in April. In July Eric got back to me and spoke about doing a plenary address as well as a workshop. I responded with enthusiasm. I let him know that I hadn’t done a plenary address before and that it would be a great honour to do it with the Australian Association of Relationship Counsellors because of my love of couple work and my loyalty in this area.

So there I was, very delighted and honoured to have been invited to give this plenary address. Then I began to contemplate what I believed the purpose of a plenary was. I did this by reflecting on what I wanted from plenaries when I went to conferences and listened to others and the phrase that came to me was ‘wise words’. Wise. What
exactly was I referring to when I was thinking about ‘wise words’? For me it is a broad and thought-provoking commentary that stimulates my thinking in a designated area - couple work. However, as you would understand, the notion of ‘wise words’ also activated my anxiety. *Those of you who know me know that I can have a lot to say about couple matters. I also have a lot to say about Emotionally Focused Work and couple matters, but would I have labelled them as ‘wise’? That is something I had never thought about. Could I present a plenary paper that would meet my standard and desire if I was sitting in your place?*

I began to manage my rising anxiety by not focusing on my anxiety but moving to think about the topic. What could I actually talk about? I knew I didn’t want to preach to you my ideas on how to do couple work using an Emotionally Focused approach, and how I perceive it to be an extremely useful modality in couple work. *(I will leave that to your reading of the new book in couple work that is being launched tonight. There I have a chapter on the pragmatics of Emotionally Focused couple work)* In fact I didn’t have any immediate flash of illumination. Instead my mind was like a blank screen. So I decided, or rather I reminded myself, about what I had learnt about writing. That writing, essentially, for me, was about creating a space for ideas to be seeded and nourished. These so called ‘wise words’ or ideas must be allowed to emerge in the process of the writing. These thoughts held me emotionally, reminding me to have faith in the process. That I have already experienced this process successfully.

However it didn’t help with the practicalities. A title was required. By this time it is August, and a title was required by the beginning of September. I sat and thought about my week of clinical work. Some of my couple work had been very difficult in that it had not gone well. In fact, it had gone very badly in two instances where two partners abreacted in the session becoming distressed and angry at their partner’s conduct and then informing me that they didn’t really want to be in the session. In the third instance, I had invited a woman to speak her authentic experience for the first time, and discovered that her partner, while desiring this, became highly critical and rejecting so much so that I had to resort to telling him to stop immediately in a manner that was not becoming of an experienced couple therapist. It was agony for
me. Three difficult sessions in one week and with two of them following each other. It was soothing to have a colleague present after the sessions with whom I could debrief, but I was left with many questions, “What is going on?” “What was happening?” “What had I missed?” “How come these couples fell into an abyss of pain and anger?” “How come I had not foreseen this?” “How come I had not done something more subtle and less damaging to them?”

At the time I steadied myself by reminding myself that all my couple work was not like that. Juxtaposed to these agonising experiences were also some very delightful ones. Two examples came to mind of partners who, for the very first time, were able to emotionally hold themselves in conversation with their partners. They held themselves by not becoming reactive at their partners’ comments. This in turn allowed their respective partners to stay with their own emotional experiences and become aware of their emotional reactions in relationship to their partner. In fact, as the partners held themselves, the other person was unable to blame, reflect or resist and for the very first time, began to face their emerging awareness of their own process. Yes, that is ecstasy.

In thinking about the difficulties I had in that week and also the exquisite pleasure I had in watching partners who had worked really hard and been able to hold themselves, I thought a working title could be, *The Agony and Ecstasy of Couple Work* because certainly I’d had both agony and ecstasy in that week. Well, I liked the title. It had a rhythm to it. More than that, the phrase, ‘the agony and the ecstasy’ had a familiar ring to it. As you might know, *The Agony and Ecstasy*[^1] is a fictionalised biography of Michelangelo, the famous Italian sculptor, who is renown for his extensive portfolio of magnificent sculptures and paintings that include the most superb sculpture of David and the glorious painting of the Sistine Chapel.

In acknowledgement and reference to Irvine Stone’s fictionalised account, I read this work to see what light it could shed on my reflections on couple work. It is a large book, a text of about 758 pages. It sets out the context and life of Michelangelo and the development of his sculptures, poetry and artwork.[^2] It was interesting to read as it allowed a reader to live in this imaginative space and be with Michelangelo in his life.
journey. However I do have one caveat on the book. While the book had been well researched and based on original sources of many letters and journals, it is still a fictionalised account. It is well known that the account has also been sanitised in that Michelangelo’s relationships with men have been desexualised and instead a reader is led to believe that he was heterosexual. Coming back to the text itself, one of the first comments that stayed with me related to when it was suggested to Michelangelo that he do a sculpture of a Greek theme. Michelangelo baulked saying that he knew little about Greek themes. While the scholarly group offered to teach and guide him, he knew that,

‘It had to come from him, something he knew and felt and understood. Otherwise he would be lost. A work of art was not a work of scholarship; it was personal, subjective. It had to be borne within.’ (Stone, 1961, p. 136).

This knowing resonated with me. It resonated with that part of me that knows that something else is involved when we sit in front of our clients to work. In addition to our theories and our technical craft, it is our ‘being’ with the couple that is crucial. That aspect that Michelangelo calls the personal and subjective, seems to have been subsumed or concealed in therapeutic work in the term, ‘the therapeutic relationship’. As Louis Cozolino (2004) summarised in his book, The Making of a Therapist, it is the ‘being’ with the client that is the therapy not the what ‘we do to them’. But more on that later.

From the writing of this paper, I came back to this paragraph as I now knew what I was wanting to talk about, what I was wanting to articulate as the aim of my plenary address. I wanted us, both you and me, to explore the agony and ecstasy in our work. What might it tell me as a couple therapist? What might it tell you as a couple therapist? How does our immersion in our experience aid the development of our practice in couple work? How do we understand both our clients and our own psychology at work in-session? How can both our agony sessions and our ecstasy sessions meet the criteria for Michelangelo’s phenomenon?

But let’s have a little aside. I guess I’ve come to an age, known as middle age, where my body doesn’t like to sit in chairs for a long time and where I also don’t like to be talked at for a long time. This may be a peculiarity of mine, but I think some of you
may also share it. And not even because of middle age. As this is the second address you have had this morning, I want to propose some things that might be helpful in sustaining your interest. Firstly, please feel free to move in your chairs, to do your ankle exercises or move your arms, even do stretches, even if you need to stand up. I will not worry about this activity. Secondly, I’m not going to be talking at you the whole time. As in therapy, I want to find a way to be with you. I want you also to be involved in our time together by being with your reflections and so I am going to structure some time for this. And time for our collective reflections.

**Reflection 1**

So, let us start there. I have already shared with you some agony moments. Now, I want you to reflect on one of your agony moments. I want you to take a moment to reflect on the agonies that you have recently experienced as a couple counsellor or therapist. There can be a wide variety of things that occur in a session that could be difficult for us. They can be very simple and they can be very complex. They could range from difficult issues to provocative behaviour towards you as a clinician, or to their partner or towards themself.\(^3\)

So allow yourself to take a moment here to reflect on an agony, a difficult moment you’ve had in a couple session in the last week or so. Maybe you might have a difficulty that’s sat with you for weeks, months or years. Remember we all have them. I’ve just listed out three I had in one week, so let’s join together in our support of each other in this process.

Let yourself think about the following, ‘What was your reaction?’ ‘What did you feel?’ ‘What did it do to you?’ In my three examples, I had different emotional reactions; one was shock, another was guilt and shame, and the last was anger. What were your feelings and subsequent actions? In the first example, I sent the partner out of the room to hear what was happening to the abreacting partner. In the other two examples, I encouraged and exhorted, and even instructed the offending partner to hold their reactions or stop their critical behaviour.

In my agony with my couples, I experienced a range of emotional reactions from shock, guilt, shame to anger. What was this about? At the time I was unable to grasp what was happening for me, unable to think through my own reactions. I was in fact more oriented to thinking about what ‘to do’ in the next session. That also was difficult. I resolved to wait until the next session and see what the couple had done with the material from the session. I did not have a plan or a clever intervention or strategy. At best I thought that I could apologise for what had happened in the session, in that it was my responsibility to provide a ‘safe’ place. Not that having strong emotions means that it is not safe, it is just that they were abreactions, defensive and
secondary reactions to their partners. In the first example I had not predicted or experienced this before whereas in the second example, I felt that I should have known or predicted the response. In the last example, I was at a loss to say what I could apologise for except that maybe I had invited the couple to talk without leaving sufficient time in the session for a thorough or therapeutic unpacking of the responses. In summary I was contemplating taking a ‘one down’ position from a technical point of view but not from a personal point of view. What I mean by ‘not from a personal point of view’ is that I had been unable to process my emotional reactions. I was more focused on the couples and consumed by being shocked, aghast or angry with one or both parties, and seeking to work out how to retrieve the situation.

I was very pleasantly surprised by the next sessions. With the first couple, I discovered that they had greater understanding of their process and wanted to take their next steps. The husband said he felt that they were like two children trying to be in a relationship and that he himself he was trying to be adult and sitting with the child self within him more. Similarly she spoke about her response to hurt which was to withdraw and go into her ‘cave’, and that she needed to find something to hold herself in situations that felt emotionally dangerous to her. In my second example, the reactive partner was feeling despondent because how they can still hurt each other in dialogue. I invited them to select some cushions to represent their inner aspects – both their hurt parts and their external aspect or persona - as a way to remind them of each other’s vulnerabilities. Both were able to see that when the other was hurting it was a threat to them. A danger. For her it meant that her ‘good’ self was going to be annihilated and for him there was impending life-threatening physical violence. I drew a diagram showing them a summary of what they said and urged them to take baby steps in talking about hurts. Finally in the third example, I replayed the audio-tape of the session as I had promised the partner at the end of the last session. He realised that he had reacted to what he had thought she had said and not what she had actually said. Replaying the tape was very helpful and they were soft with each other. They realised that the issues were about being empathic and how to be sorry with each other and how to speak about their being upset. It was only with the last couple where I felt the urge to apologise for my abrupt manner of speaking to him but he was clear that he had been ‘out of line’ and unable to control his reactions.
What did I take from these sessions? Certainly I felt very pleased and less anxious as a result of the sessions. Every couple had taken another step in their work. They had not withdrawn from therapy nor reacted further with each other. In fact, they had taken their next steps. It reminded me yet again, both from the difficult sessions and the ones following, that I need to really be cognisant of the psychology of the partners. That I have to be really mindful of the complexity of the partners’ psychology. What do I mean by that, the complexity of the partners’ psychology? What I believe I am referring to is how a person is constructed in a psychological way. Their emotional signature. In a way, how they do their emotional relating tells us about the core of the individual. What do they react to? How do they react when they feel hurt or threatened? Do they pacify and comply? Do they attack and threaten? Do they go silent and withdraw? While these examples of complying, attacking or withdrawing are seemingly simple summaries of patterns of secondary or defensive reactions, what I am referring to is the internal structure, the intrapsychic make-up of an individual and how it is touched and influences each response and reaction. While as a therapist I can summarise patterns or describe them, I am afraid that I really only know them when I experience them in-session. By my experiencing the first example and the woman freezing on me, I really felt her abreaction. I could feel being frozen out and indeed being thrown out. With the woman who was building her reactivity, I could feel my powerlessness in the face of her growing hysterical reaction. I feel that now I ‘knew’ their reactions. I feel that I could understand and work with it more than from a purely intellectual understanding or observing the couple.

These thoughts, these knowings, may be the beginning of my ‘wise’ words. As a couple therapists I need to get to know both emotionally or experientially the psychology of a client. I believe this to be this similar to what Michelangelo experienced in his work.

*Stone works with you. It reveals itself. But you must strike it right. Stone does not resent the chisel. It is not being violated. Its nature is to change. Each stone has its own character. It must be understood. Handle it carefully, or it will shatter. Never let the stone destroy itself. (Stone, 1961, p. 48)*
Michelangelo was described as waiting to find the form embedded in the stone and it is the waiting rather than crassly taking up his tools and chipping away to find the object. Instead, he observed and drew and waited until he could experience or see the form for the sculpture. It’s an experiential moment. And I believe that that is what happens with us with our clients. Sometimes I suddenly know something about a client, and I can feel embarrassed and ashamed, thinking ‘I should have known that’. And maybe I did know it intellectually, but it’s only when I know it emotionally do I ‘know’ it. When it appears in the person and I have experienced it.

**Reflection 2**
*What it taught you about your work or you. Remember for me, it reminded me to think again about the importance of the individual’s psychology. For myself, I had not been able to process what had happened to me.*

The many models of both individual and couple work consider the intrapersonal or intrapsychic level to various degrees. I am not wanting to differentiate and elucidate these differences here today. However, with the approach I am most involved with, Emotionally Focused Therapy, I understand that therapists are invited to assess the emotional reactions in the present and then work to access the fundamental or authentic responses. While there is acknowledgement of the influences of the past, it is my understanding that this therapy does not have a comprehensive understanding of or a technical approach to the pervasive influence of early childhood patterns nor an understanding that allowing or inviting the emergence of one’s authentic response is fraught with existential fears and anxieties.

From the published literature, Emotionally Focused therapy does not appear to explore the need for long-term therapy, where there is the development of a sustained and intimate relationship between the therapist and client, where transference issues emerge and can be studied and explored, and where the therapeutic relationship is crucial in the healing process. In our work at the Institute, we have been exploring the notion of long-term work with couples where we nurture the growth of the true or authentic self both by working with emotional experience and by developing a therapy relationship that is both real and symbolic, where we truly experience the client’s nature and psychology by being a participant in relationship. Again the process of what Michelangelo went through in sculpting is similar to what I believe
we must do, which is to be in relationship with our clients for the purpose of their healing.

*To sculpture is to remove marble; it is also to probe, dig, sweat, think, feel and live with it until it is completed.* (Stone, 1961, p322)

It is the experiencing, the worrying, the reflecting, the feeling, and the living with the couple and their relationship that is similar to the probing, digging, sweating, thinking, feeling and living with the sculpture until it is completed.

If we allow this premise, to be in relationship with our clients, we must think about the person in us. Again, while this is not a new idea I have found that many writers of therapy are less enthusiastic to consider and write about the person of the therapist and how this influences the type of relationships we develop. It appears to me that writers are more inclined to elaborate the therapeutic relationship, known as the therapeutic alliance. However therapy, as Michael Kahn (1991) stated is a relationship. Actually he asserted that the relationship is the therapy. At its most basic level a therapy relationship involves two people and this must involve both interpersonal and intrapsychic aspects of both parties.

A way to get inside us as therapists is to explore and unpack our emotional reactions at all levels – the feeling, thinking and behaviour levels. In my examples, it is the shock, the guilt and shame, and also the anger that needs to be explored further. I was shocked because I was unprepared for the woman’s emotional reaction. Underneath that shock I have only recently realised that there was a feeling of disgust and revulsion at my client’s inability to control herself. I felt guilty and ashamed because I felt that I should have known that the second woman would have abreacted. I was plain angry in the third example, feeling that I had ‘delivered the goods’, as the man had wanted, and then he had rejected them and been disrespectful with his partner’s authentic response. Let me tell you that this reflection has taken five months to emerge. Let me confess to you that if I was not contemplating the agony and the ecstasy in couple work I would have avoided this reflection. But there is more. Why did I feel guilty and shamed at not knowing? Why was I angry that the goods that I had delivered had not been accepted? What was really touched in me?
Like my clients, I have a psychology as well. A psychology that influences the way I can experience and express my experience, and to relate and respond to others. My psychology comes with me into the therapy room and can add to the richness of each encounter. It can be used and understood and worked with in the service of my clients. From an Emotionally Focused perspective and from the work we have developed at the Institute, the way I experience the world and the way I deal with myself and others can be described as more an annihilated presentation. I am more likely not to show my more vulnerable feelings, instead presenting and coping and being in charge in order to avoid verbal criticism or attack, or the threat of intrapsychic annihilation. Therefore I am more likely to hold my reactions, withdraw my self, and become other focused and practical. Some of you might relate to this description whereas others might show different reactions such as feeling anxious, overwhelmed, bad and maybe losing focus in-session and unable to really take charge again.

Over the years, I have explored and worked on many aspects of myself. In that week, I was able to hold myself enough that I didn’t withdraw myself emotionally in-session. I did not attack or criticise the client. I was able to hold myself enough in-session. Further I was able to go into the next session without a plan of what to do, but trusting that I could be present and authentic, and the operative word here is ‘be’, being able to be receptive to whatever was presented. I may have needed to apologise, I may have wanted to apologise, I might have needed to hear criticism of my practice, and I might have had to do some fancy footwork to repair a rupture in my relationship or their relationship. From the sessions, I came away relieved that the worst had not happened but rather pleased that positive things had happened as a result of the difficulties, and that the couple had grown. In a manner similar to Michelangelo who felt that he had to grow as his sculpture grew, I grew as well.

Inside himself he had to grow as his sculpture grew and matured.
(Stone, 1961, p. 322)

I walked away in awe of my couples. I walked away reminding myself that it is the psychology of the client that I need to be mindful of. Reactivity happens in a micro-second. At times there is no time to stop, block or head it off at the pass. I need to
trust myself to work at the site without injuring the couples in these moments because of my own reactivity. It is only by deeply immersing oneself in our therapy relationships and by deeply reflecting on them can we truly understand the vulnerability of the self of both our clients and our selves. As with the sculptor, Michelangelo spent the time drawing, contemplating, and waiting until the form was revealed,

That is a measure of the sculptor: how deeply can he penetrate the shell? With every subject I say to myself, ‘what are you, truly, as you stand naked before the world? (Stone, 1961, p. 291-292).

I understand that some therapists or counsellors would say to me that they do not have the time to do this type of work. Some therapists or counsellors would say that some couples would not want to spend the time in relationship and deep exploration. This is true for many practitioners who have to work with terrible time-constraints from agencies and from the couples themselves. However, we need to ask ourselves, are we prepared to be in relationship with our couples? Really in relationship. To discover the psychology of our clients by experiencing and knowing. To explore our own psychologies and how they influence the styles of relating in-session. It is not about finding a protocol for therapists’ reactions but being aware of what our own reactions tell us about ourselves, and about our clients.

By way of drawing this to a close, in my researching Michelangelo, I found a concept in the literature, known as Michelangelo’s phenomenon.

...a congenial pattern in which close partners sculpt one another in such a manner as to bring each person closer to his or her ideal self. (Drigotas et al, 1999)

As in Michelangelo’s accounts, it is about finding the form in the sculpture. With couples it is the same. Finding the ideal self in the other. This is demonstrated by relating to the other as if they are that ideal form and this in itself confirms to the partner their ideal self. They then move towards that ideal self within themselves. It is a form of partner perceptual affirmation, that motivates or reinforces the self-movement towards the ideal self.10
In my agony example, I discovered that the couples not only survived the experiences but continued to grow. In a process similar to Michelangelo’s phenomenon, their relating to me reinforced my ideal self. What might that be as a therapist? In my view it is that I am warm, caring, respectful and competent, enough of the time. This is what was reinforced in those next sessions. True to form where our actual self is approaching our ideal self, I felt happiness and elation (Drigotas, 2002).

This is also what I believe happens with our ecstasy moments. In my case, I was proud of those partners who, as a result of our work, were able to hold themselves emotionally for a sustained period of time in a session for the first time. In holding themselves, they also stayed connected with their partners and demonstrated warmth and mature relating. In addition to feeling pleased and proud of my clients, I also felt that happiness and elation. That was more about me. These interpersonal experiences where the couples were relating, although not to me directly, reinforced my view of myself as a competent therapist. Here my competencies were being mirrored to me by my clients’ demonstrations of holding themselves. My actual self being the same as my ideal self as a couple therapist was being reinforced which in turn was demonstrated by my own calm and warm responding to both parties.

**Reflection 3**

For the very last time I would like you to take a moment and think about your ecstasy moment in couple work. What was it? What happened? How did you feel? What did it reinforce in you in terms of your ideal self as a couple counsellor or therapist.

In summary, as I hope I have demonstrated that we need to take the time to reflect on what has happened, and then to consider how to bring our self into the therapy room. In sharing with you my reactions and thoughts about undertaking this plenary address I hope I have demonstrated how I have been able to bring my self to this address. In addition, sharing and reflecting about what happened to me with my couples in my agony and ecstasy moments allowed me to see what emerged in the process. Hopefully it might help you in your unpacking of what happens to you and how that might help you in your couple work.

Let us take these lovely moments with us. Place them in our right hand. I invite you to allow yourselves to be reminded of them during these next two days when we
might be challenged or when we might realise how our clinical work provides us an opportunity for growth to our ideal self as a couple counsellor or therapist.

References


**End-Notes**

3. Questions of open marriage, violence, multiple affairs, cross-dressing, long-standing interactional difficulties are just some of the issues that can be agony for us. For example, being provocative towards you as a therapist would be by being argumentative, not listening to you, not doing as you ask, or attacking or criticising you. Provocative behaviour towards their partner would be illustrated by blaming, attacking, threatening, and passive aggressive behaviour. Finally, provocative behaviour toward self could be self criticism and avoidant behaviour.
4. In an edition of Family Process (No.4, 2004) a number of articles focus on the therapeutic alliance in terms of formation, optimisation and clinical considerations (Garfield, 2004; Knobloch-Fedders et al, 2004; Symonds & Horvath, 2004). William Henry and Hans Strupp (1994) speak about the importance of the person of the therapist but move to talk about therapist’s facilitating human qualities such as warmth. There appears to be no discussion on the psychology of the therapist and how to work with that. Horvath (1994) refers to interpersonal disposition of the therapist yet with clients refers to interpersonal and intrapersonal factors. What happened to the intrapersonal factors of therapists? A very interesting article by Jeremy Safran and Christopher Muran (2006) explores the evolution of the term, therapeutic alliance, and suggest that the term may have outgrown its usefulness.
6. Our emotional reactions including thoughts and actions are known as countertransference. Charles Gelso and Jeffrey Hayes (2002) distinguish between acute and chronic countertransference. They suggest five factors in the management of countertransference: self-insight, self-integration, empathy, anxiety management, and conceptualising anxiety.
7. Janine Tremblay, William Herron and Candace Schultz (1986) completed an interesting study exploring theoretical orientation and the personality of the psychotherapists. In comparison to behaviour therapists and psychodynamic therapists, humanistic therapists were found to be more inner-directed, affirming of self-actualising values, and expressing feelings in action. Further, they differed from the behaviour therapists and psychodynamic therapists on flexibility, acceptance of personal aggression, sensitivity to their own feelings, and the development of intimate relationships.
8. Jeremy Safran and Christopher Muran (2006) suggested that research should focus broadly on relational factors such as the therapist’s relational schemas as well as the client’s.
9. The annihilated presentation can be contrasted with the abandoned presentation although I believe that there is a continuum between the two descriptive poles (Webster, 2001).
10. The Michelangelo phenomenon where the partner sculpts one another or a partner who sculpts towards the self’s ideal (Drigotas et al, 1999; Kumashiro et al, 2006; Rusbullt et al, 2005) can be contrasted with the Pygmalion phenomenon where a partner sculpts the partner’s ideal form or the sculptor’s ideal. (Drigotas et al, 1999) or a partner who sculpts towards the partner’s ideals (Rusbullt et al, 2005).