

# Using Typical Gender Differences as a Resource in Couple Counseling

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## Introduction

- Faculty of Psychology, Chapman University, Orange, California USA
  - ❑ Infertility research
- Marriage and Family Therapist (MFT)
  - ❑ Infertility counseling
  - ❑ Couples therapy
- MFT Program Director
  - ❑ Couples therapy, clinical supervision, family development across the lifecycle
  - ❑ Oversee national accreditation

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## Learning Objectives

- At the conclusion of the workshop, participants should be able to:
  - ❑ Understand how gender differences present in couple counseling
  - ❑ Identify how gender differences impact infertility counseling
  - ❑ Know how gender socialization impacts men's participation in infertility counseling
  - ❑ Apply basic therapeutic principles to address gender differences in infertility counseling
    - Education regarding basic gender differences
    - Acceptance and Commitment Therapy (ACT)

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## Gender



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## Gender

- The meaning that members of a culture attribute to being male or female
- Gender in relationships has changed over time
  - ❑ Less distinct differences (roles more shared)
  - ❑ Power distributed more equally
  - ❑ Stereotypical gender patterns persist in distressed couples
- Helping couples move beyond culturally based ineffective gender patterns is an important element of relationship success

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## Gender Similarity

- Most scholars agree that gender similarities outweigh gender differences
- 46 meta-analyses found that men and women are statistically similar on nearly all psychological variables
- Guard against overinflating claims of gender differences

Hyde, J.S. (2005). The gender similarities hypothesis. *American Psychologist*, 60, 581-592.

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## Gender Differences

- Even though there are similarities, there are differences
  - ❑ Biological differences (nature)
  - ❑ Societal differences (nurture)
    - Differences that arise from societal discourse



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## Gender Differences & Mental Health

- General Mental Health
  - ❑ Women are 2-3 times more likely to have depression and anxiety
  - ❑ Males are 2 times more likely to abuse alcohol
  - ❑ Women more likely to seek therapy services



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## Gender Differences & Stress

- Basic differences when faced with stress?
  - ❑ Women cope by:
    - sharing their feelings
    - seeking support from others
    - Seeking emotional validation
  - ❑ Men cope by:
    - seeking solutions
    - attempting to fix the problem
- Turn up the volume or turn it down?
- Discussion Question
  - ❑ What are the key gender differences you have seen in the various cultures we have represented in this room?



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# Gender and Couple Counseling



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## Relationships and Gender

- Most couples seek intimate, mutually rewarding relationships
  - Belief that each partner should benefit from the relationship
    - Occurs when needs, goals, and desires are met
- Studies show that few couples are able to achieve this ideal (end of the honeymoon)
- Many reasons why
  - Gender differences can be one reason

Knudson-Martin, C. (2008). Gender issues in the practice of couple therapy. In A. Gurman (Ed.) *Clinical Handbook of Couple Therapy* (4th ed.) 641-661. New York, Guilford.

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## Gender and Couple Counseling

- Women seeking counseling more often
  - Women's higher expectations regarding the relationship and increased desire for change
  - Men's general reluctance for counseling
  - Men's reluctance to speak about their problems with support networks (women 2x more likely to do so)
  - Men less comfortable with emotional expression

Doss, Atkins, & Christensen (2003). Who's Dragging Their Feet? Husbands and Wives Seeking Marital Therapy. *Journal of Marital and Family Therapy*, 29, 165-177.

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## Relationship Distress in Couples

- True or False: Conflict is the main cause of relationship distress

False



Gottman, J. (1999). *The marriage clinic: A scientifically based marital therapy.*

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## Relationship Distress in Couples

- True or False: Emotional distancing is the main cause of relationship distress?

True

- Partners slowly drift apart & lead parallel lives
- Fewer interactions (ratio of positive to negative drops)
- Partners have limited opportunities to problem-solve and avoid intimacy (emotional and sexual)
- Relational wounds go unrepaired, causing emotional suppression, resentment, and isolation
- Partners grow further & further apart

- The end result?

Partners wake up one morning and wonders why they are spending their lives with a stranger

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## Strengthening Relationships

- Is there any hope?
- Yes! Relationships are strengthened when:

- Couples enjoy emotional connectedness
  - Positive behaviors, thoughts, and acceptance increases (TBCT, IBCT)
  - Attachment needs are met (EFT)



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## Strengthening Relationships

- Healthy interactions occur more naturally
  - ❑ Individuals communicate needs to their partner and ask that these needs be met
  - ❑ Statement of needs fosters responsiveness and negotiation
  - ❑ Couples share emotional and personal struggles (intimacy) and receive support from the other (security)
- The end result?
  - ❑ Relationship satisfaction increases, partners create shared meaning



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## Gender & Infertility



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## Gender and Infertility

- Women experience more infertility stress
- Women experience more depression and anxiety
- Women more likely to begin treatment
- Men more likely to end treatments sooner
- Women more likely to want to discuss the infertility problem
- Men and women report equal levels of marital satisfaction
  - ❑ Long term treatment can decrease MS

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## Gender and Coping

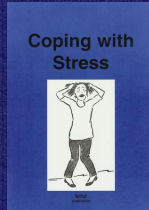
### ➤ Men and women cope differently

#### ☐ Women

- Active avoidance coping
- Seek social support
- Accepting responsibility

#### ☐ Men

- Distancing
- Emotional self-controlling
- Problem-solving



Peterson et al. (2006). Gender differences in how men and women referred with in vitro fertilization cope with infertility stress. *Human Reproduction*, 21, 2443-2449.

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## Gender and Partner Coping

### ➤ How one partner copes impacts the individual stress levels of the other

#### ☐ Emotional Self-Controlling

- Female High/Male Low
- Increased marital distress for men

#### ☐ Distancing

- Male High/Female Low
- Increased depression in women

Peterson et al. (2006). Coping processes of couples experiencing infertility. *Family Relations*, 55, 227-239.

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## Gender and Partner Coping

### ➤ Active-avoidance coping

#### ☐ Avoiding infertility related situations

- Partner coping increases distress in men and women

### ➤ Meaning-Based Coping

#### ☐ Finding new goals in life, infertility takes on a positive meaning

- Men's use increased social distress in women
- Women's use decreased marital distress in men
- Timing effect?

Peterson et al. (2009). The longitudinal impact of partner coping in couples following 5-years of unsuccessful fertility treatment. *Human Reproduction*, 24, 1656-1664.

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## Gender and Infertility

- What other gender differences have you seen that we have not discussed?



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## Gender & Counseling The Infertile Couple



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## Counseling the Infertile Couple

- Couples who regulate emotions under stress are less vulnerable to relationship distress
- Counselors must address gender differences



Newton, C.R. (2006). Counseling the infertile couple. In S.N. Covington & L.H. Burns (Eds.), *Infertility Counseling: A Comprehensive Handbook for Clinicians* (2nd ed., pp. 103-116). New York: Cambridge University Press.

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## Gender Issues in Assessment

- Assess impact of infertility on:
  - ❑ Psychological distress (depression, anxiety)
  - ❑ Relationship distress
    - marital dissatisfaction
    - sexual dissatisfaction
  - ❑ Treatment participation / decisions
  - ❑ Therapy participation

Newton, C.R. (2006). Counseling the infertile couple. In S.N. Covington & L.H. Burns (Eds.), *Infertility Counseling: A Comprehensive Handbook for Clinicians* (2nd ed., pp. 103-116). New York: Cambridge University Press.

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## Typical Gender Differences

- Women
  - ❑ Feel highly stressed by infertility
    - Depression
    - Role failure, guilt
    - Loss of control
    - Decreased sexual satisfaction
    - Loss of social networks
  - ❑ Can feel responsible for the infertility - even when male-factor diagnosis



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## Typical Gender Differences

- Men
  - ❑ Feel moderately stressed by infertility
    - Depression (less)
    - Role failure - guilt
    - Loss of control
    - Decreased sexual satisfaction
    - Feelings of inadequacy (failure to protect partner)
  - ❑ Reactions can become similar to women's when male-factor diagnosis (mixed findings)



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## Engaging Men in Counseling

- Counseling is at odds with masculine socialization
  - ❑ Counseling can be a threat to the masculine identity (infertility already is)
- Men experience distress trying to:
  - ❑ Fit the traditional model of masculinity
    - Emotional stoicism and interpersonal distance
  - ❑ Recent conceptualization
    - Emotional skill and emotional availability

Englar-Carlson, M., & Shepard, D.S. (2005). Engaging men in couples counseling: strategies for overcoming ambivalence and inexpressiveness. *The Family Journal*, 13, 383-391.

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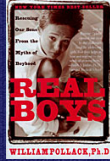
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## The Socialization of Gender

- Problem-solving behavior and anger are acceptable
- Boys socialized to suppress vulnerable emotions
  - ❑ Expressing sadness is not acceptable
    - Boys don't cry
  - ❑ If I am sad, then I am weak
  - ❑ Boys become ashamed of emotions
  - ❑ Boys cut themselves off from their emotions
  - ❑ Result - "As a man, if I am emotional (about infertility), then I am weak, and I have to be strong"



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## Relational Dread

- Relational Dread - the paralysis a man feels when he fails to demonstrate competence in the relationship
  - ❑ Personal strengths used to succeed in life (career) become a liability in one aspect of the relationship (emotions and infertility)
    - Clinical examples
  - ❑ Confusing to men



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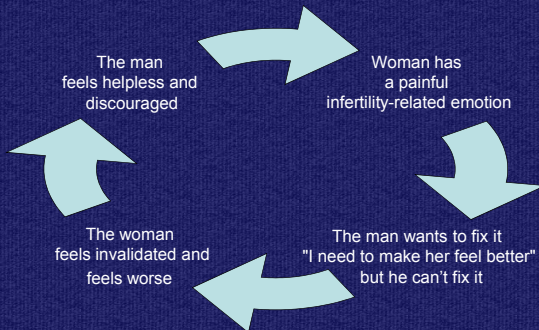
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## Gender Communication in Infertile Couples



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## Strengthening Relationships

- Healthy interactions occur more naturally
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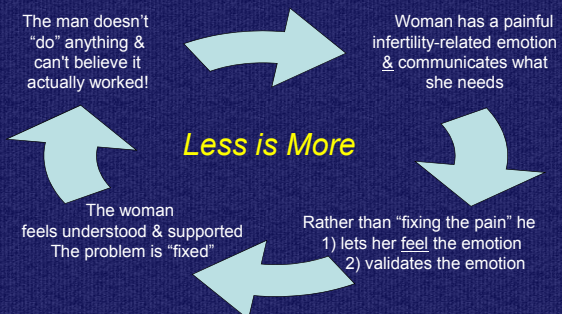
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## The Emotional Paradox



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## Case Example

- Couple entered therapy – man felt wife’s emotional distress was as an obstacle to overcome, not a necessary step in the path towards recovery

### Sessions 1-3

- ❑ “I came to therapy for her because I’m not into the therapy thing”
- ❑ “We need to stay positive and focus on the next step”
- ❑ “I’m a logical person, I’m not emotional”

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## Case Example (cont.)

- Session 12

- ❑ “Over time, it is good, I picked up on things that helped”
- ❑ “I learned that her being sad is OK”
- ❑ “*It’s important for her to have these emotions*”
- ❑ “I’m seeing that *it’s necessary* for her to feel negative emotions”

- Outcome: Wife felt emotionally supported and connected; man felt like he was helping and supporting her

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## Case Vignette and Practice



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## Case Vignette & Practice #1

- Men do not know what to “do” with their wives’ feelings related to infertility – women have trouble communicating their needs to the man
  - ❑ Assist men and women in learning the keys to emotional connection in infertile couples
    - Both members play a role
    - Validate and empathize with their dilemma
    - Discuss male socialization
    - Reframe the struggle as an effort to connect with his wife
    - Educate couples about the emotional paradox
    - Help wife learn to communicate her needs



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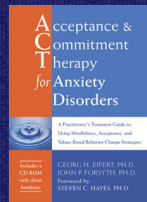
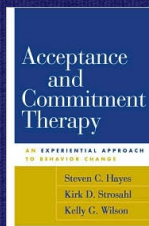
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## Acceptance and Commitment Therapy (ACT)



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## Basic ACT Principles

- Experiential acceptance-based behavior therapy
- Created in 1999 - Steven Hayes
- Third wave of behavior therapy
- Targets the function of experiential avoidance
  - ❑ Tendency to engage in behaviors to alter the frequency, duration, or form of unwanted private events
    - Control the uncontrollable
    - The attempted solution becomes the problem
    - Limits and cuts one off from their own experience

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## Empirical Support

- Literature base is growing; results are promising
  - ❑ Empirical studies testing ACT for:
    - Anxiety
    - Stress
    - Depression
    - Pain
    - Substance use / addiction
  - ❑ Empirical single-case studies: Peterson & Eifert
    - Couples distress (Cognitive & Behavioral Practice, 2009)
    - Infertility Stress (Cognitive & Behavioral Practice, in press)

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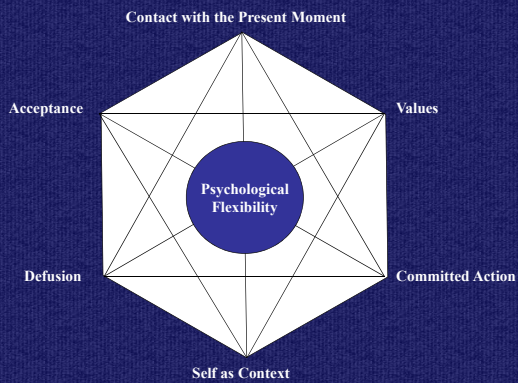
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## ACT Hexaflex



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## ACT and Infertility

- Experiential avoidance is common for women and men with infertility
  - ❑ They avoid infertility related thoughts and feelings
- How has avoidance worked for the couple?
  - ❑ The couple's experience is the guide
  - ❑ If they cannot control it, maybe there is a new way
- Let go of the struggle
- Are you crazy?



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## Creative Hopelessness

- Helping the client make space for new solutions
- See the unworkability of their control efforts
- Chinese Fingertrap Metaphor / Exercise
  - Experiential exercise for client to learn to move towards suffering in order to lessen it
  - "lean into" infertility stress
    - Infertility = Emotional pain
    - Emotional pain + non-acceptance = Suffering
    - Reduce suffering by letting go of the struggle
    - Acceptance
      - Not resignation
  - The client has space to do other things they have put on hold

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## Developing Mindful Acceptance

- Mindful acceptance can help couples let go of the struggle
  - Acceptance means letting go of fighting the pain of infertility
  - Willingness to experience thoughts, memories, sensations and feelings about the infertility
  - Ultimate goal of mindfulness is freedom from unnecessary suffering
    - Centering exercise and mindfulness exercises

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## Acceptance and Change

- Acceptance is the only way out of hell – it means letting go of fighting reality. Acceptance is the way to turn suffering that cannot be tolerated into pain that can be tolerated.

Marsha Linehan

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## Balancing Acceptance and Change

- God grant me the serenity to accept the things I cannot change; courage to change the things I can, and wisdom to know the difference



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## Case Vignette and Practice



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## Case Vignette & Practice #2

- Reducing high levels of infertility stress
  - The Chinese Fingertrap Metaphor/Exercise
    - Help the couples think of a new approach to infertility stress
    - Reduce struggle with infertility-related thoughts and feelings thereby decreasing personal suffering



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## Case Vignette & Practice #3

- Helping couples mindfully accept infertility-related thoughts and feelings
  - In-session experiential exercises
  - Increase psychological flexibility in couple
    - Beneficial for both members of the couples – yet a delayed gender effect for men



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## General Discussion

- Experience of Counselors
  - As infertility counselors, what additional ideas have you found, that we have not discussed?



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## Take Home Points

- Addressing gender differences in infertile couples is essential to successful counseling
  - Discuss gender socialization
  - Women are more likely to seek counseling
  - Men can't fix infertility and can feel helpless



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## Take Home Points

- Counseling interventions can help couples close the gap between partners
  - The emotional paradox: men - the “doing” is the validating and understanding; women - communicating what she needs
  - Letting go of the struggle with infertility-related thoughts and feelings through mindful acceptance can provide increased psychological flexibility in coping with infertility



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