

## **Working with Couples Using Hypnotherapy** **Amanda Ferguson**

Presented at the Annual Convention of the Australian Society of Clinical Hypnotherapists, 2004.

Published in the Journal of Australian Society of Clinical Hypnotherapists, April, 2005.

### Abstract

By the time a couple reaches out for therapy the problems are usually highly complex and entrenched. Typical issues include role-playing, difficulties in communication, understanding, empathising and resolving conflicts. As part of comprehensive therapy, hypnotic techniques can be powerful and fast ways of breaking through these difficulties. Couple therapy is unlike individual therapy, in that it is not possible to fully empathise with two people simultaneously – especially if they are warring. Couple therapy presents additional challenges for the therapist of power struggles and managing the complexity of two people's emotions, information and realities at once. Countertransference issues include the triggering of the therapist's emotion, confusion, and blind spots from one's own relationship or childhood parenting. A couple presenting in therapy is typically ready to work unconsciously, but conscious issues can hinder the process. Hypnosis, by keeping knowledge out of the consciousness, gives the unconscious minds the ability to work unimpeded. Theories and techniques from the literature as well as from the author's experience are discussed in working with many of the common problems that couples and therapists deal with. Case studies are used to illustrate the points. Future directions for research and therapy are discussed.

It is now well accepted in the literature that couples must be proactive in continuing to develop the knowledge, skills and attitudes to sustain and enhance their relationships if they want their relationships to survive in the long term. Gone are the days of a traditional contract and assumption of a marriage for life (Arnett, 2000; Larson, Wilson, Bradford, Furstenberg & Verma, 2002; Goldberg, 2003). We are now as therapists called upon to provide more techniques and strategies that will give people the necessary insights and understandings of them selves and of each other. Therefore it is critical that we draw on all of the modalities that we have at hand in our work with couples, including the modality of hypnosis.

Health care is beginning to embrace hypnosis in a revolutionary way, as seen by the inclusion of Oakley's article in the prestigious *American Psychologist* earlier this year (2004). A quiet revolution of the use of hypnosis in couple counselling might also be underway. Murphy's revolutionary work, first published in 1963 describes trance work with couples. Family therapist David Calof, is one of the leaders of modern hypnotherapy and its use in couple counselling since 1996. Luquet (1996) also employs trance work with couples and their images of love. The recent volumes of journals for family and relationship therapy are littered with articles proclaiming new versions of hypnosis for couples, such as facilitated imagery, the new hypnosis and Dynamic Energetic Healing

(Ross, 1988; Godoy & Araoz, 2000; Hammond-Newman & Brockman, 2003; Araoz, Burte & Goldin, 2001; Fourie, 1991; Ross, 1988; Araoz & Negley-Parker, 1988; Cooper, 1985). Hence hypnosis is being used quite widely in couple counselling.

Couple therapy is unlike individual therapy, in that it is not possible to fully empathise with two people simultaneously, especially if they are warring. Countertransference issues include the triggering of the therapist's emotion, confusion, and blind spots from one's own relationship or childhood parenting. Maintaining a level of attachment with the two individuals can be extremely difficult for many reasons, if only for the fact of there being not only three individuals, but also three dyads and a triad in the room. The dynamics can be overwhelming to a therapist and clients and can very quickly deteriorate or escalate into chaos. Hypnosis can be used to contain, re-frame and work with conscious and unconscious emotions and thoughts.

Couple therapy presents additional challenges for the therapist of power struggles and of managing the complexity of two people's emotions, information and realities at once. Hypnosis allows the therapist and clients to move back and forth more nimbly between each individual, validating each person's feelings, thoughts, beliefs and realities. In a trance state, a couple can accept and process so much more of these complexities and more quickly because of the infinite processing capacity of the subconscious mind that is more available in the trance state (Pert, 1999; Damasio, 1996, 2000). Individuals usually seem to feel safer in the trance state, even when experiencing sad or disturbing memories or emotions, than they do out of trance. Thus hypnosis enables deep couple therapy to be conducted more efficiently in many cases.

A couple presenting in therapy is typically ready to work unconsciously, but conscious issues can hinder and even thwart the process. Hypnosis keeps knowledge out of the consciousness, giving the unconscious mind ability to work unimpeded. Individuals are conscious of being lied to by their partner, cheated on, disappointed, not having their needs met and so on. They are conscious that there is a problem and, typically believe that it is their partner who needs 'fixing'. The resulting behaviour can be variously described as a polarising of positions, stonewalling, role-playing, avoidance, freezing out, shutting down and leading parallel lives. Under trance state clients can usually identify these defence mechanisms and deal with their own subconscious issues more readily.

*A case example was seen in a lesbian couple where one had had an affair. While she knew she had caused a problem she was ready to move forward with her partner and just wished her partner would 'get over it'. Under a trance state it became clear to her that she subconsciously was fearful of intimacy and therefore kept wanting to rush on as a way of avoiding intimacy.*

So, what is this thing called love? Perhaps it involves much more hypnosis and trance work than we've ever fully acknowledged? The experience of romantic love is well summed up in the Greek myth of Eros and Psyche (Luquet, 1996, p.2).

*'Once there lived a beautiful mortal named Psyche, whose name is the Greek word meaning soul or mind. So lovely was Psyche that she attracted the attention of Aphrodite, the Goddess of Beauty. Despite her status as a Greek deity, Aphrodite was prone to great jealousy, and she felt threatened by Psyche's very existence. And so she decided to cast a spell on Psyche via her son Eros, the God of Love.*

*Eros was an archer whose arrows would cause anyone struck by them to fall instantly in love. Aphrodite thought it would be funny to have Eros's arrow strike Psyche who, in turn, would fall desperately in love with the first thing she came upon. Aphrodite's vengeful plan backfired. Upon Eros's first glimpse of Psyche, he was so taken by her beauty that he accidentally cut himself on his own arrow. Indeed he fell so madly in love with her that he took the lovely mortal as his wife. There was one catch, however: he did not want her to know that he was a god, so he would never let her actually see him. During the day he would appear as a voice; he would only come to her in the dark of night. Psyche longed to actually see Eros.*

*Finally, Psyche approached Eros in the night, holding a light over him while he slept. Upon seeing that he was hardly a monster but a god she was so startled that she spilled a drop of oil from her lamp on him, and he awoke. Naturally, Eros was angry that Psyche had tried to see his true identity, and so he stripped her of all her luxuries that he had given her, condemning her to roam the land alone.*

*Aphrodite proclaimed that Psyche could have Eros back – but only after the successful completion of some humanly impossible tasks. She did not know that Eros would be by Psyche's side, helping her undertake each task. Psyche's final task was to retrieve beauty from Persephone by going to the underworld and back. Psyche lifted the lid of Persephone's coffin only to finally decide that she'd had enough of Aphrodite's rules for her to win back Eros, and she fell asleep. Eros swooped to her side and kissed her awake. The gods were so touched that they made Psyche immortal and she was able to stay with Eros forever.'*

In fact, romantic love entails a lot of entrancement and requires the ability to manage trance. As the myth shows, we experience a blinding or entrancing process in the early stages, then a disenchantment and an awakening to the facets of our partner that we had ignored, minimised or idealised, that must be negotiated and integrated into the relationship. Finally, idealised love for each other must also be regained. Therefore hypnosis in many ways is an obvious methodology for working with romantic love.

Hypnosis can be formal or informal. A client and therapist often fall into a joint entrancement, the therapist moving in and out of the trance as analysis occurs. Couples, too tend to be jointly entranced and to reveal this entrancement at various points in therapy. Kershaw (1992) has described this as the hypnotic features within the marital dyad. Other therapists report on the use of hypnosis with couples where one partner may be hypnotised while the other observes; both jointly hypnotised; or that they may

hypnotise each other (Araoz, 1981). Thus it is important to consider the possibility of trance between clients as well as between the therapist and clients.

Relationship therapists observe and work with the dynamic occurring between a couple as much as with individual issues. This dynamic is typically a highly complex set of interactions on levels of consciousness and unconsciousness (Hazan & Shaver, 1987). Theorists have attempted to diagnose the dynamic between couples on the conscious level of observed behaviour, for example by the style of conflict resolution that the couple employs (Gottman, 1998). Working on this conscious level can be useful in gauging degrees of compatibility and to help a couple with behavioural modification such that they might communicate and collaborate more effectively. There is a risk however, when we only work with the consciousness between a couple, that we are working with the adapted self and defence mechanisms and not the authentic self and underlying conditions. Hypnosis allows us to delve below conscious dynamics to these underlying issues.

Gordon Emmerson addresses the current pressures on couples and observes that repairing rather than enhancing a relationship has become the only vision of many couples. Emmerson argues that ego state hypnosis is uniquely equipped to assist a troubled relationship with communication and awareness, as well as to assist a couple to enhance to a new level the enjoyment of their relationship. Ego state therapy can access the different communicative parts of each partner for improved awareness and problem resolution. An angry part of one person cannot be properly heard by a partner listening from a hurt and reactive part. Individuals can learn about the distinctive parts of themselves and their partners, and which parts can best communicate with each other.

*In a recent case the husband learnt from his wife through ego state work that when she seemed angry with him she might not be angry with him but with something else. This was a revelation to him as he attributed himself as always the cause of her anger. He also learnt that it wasn't helpful for him to respond from his angry part but from his nurturing part. He was pleased to find himself able to manage to do this outside of therapy and both were pleased that they had stopped escalating into stormy arguments based on complete misunderstandings.*

Family therapist David Calof, is one of the leaders of modern hypnotherapy. Calof makes explicit the phenomenon that couples presenting in therapy are usually already 'entranced' with each other. Calof presents a fascinating case study of his work with couple entrancement in his highly commended book *The Couple Who Became Each Other* (1998). Couple entrancement can take many forms, which can be angry, anxious, resentful and even tempestuous. It's when a couple no longer cares about the other that they have lost and cannot reclaim an entranced state and they are less likely to remain as a couple.

*A recent case study involved a couple where the wife had engaged in seven years of affairs with other men, eventually falling in love with one of these men. This couple had been married for 21 years and had many business and family*

*connections between them. During our early sessions, the wife had trouble staying, let alone sitting, in my room, and her main mode of operating was from a heightened and very loud state of rage – directed randomly at myself and her husband. I tend to like to give some feedback at the end of an initial session to let the client know what I think the prognosis is likely to be. At the end of this couple's first session – where she had left twice yet returned each time I said 'you'll be fine, you're clearly great mates and you get on very well – we just have a lot of work ahead of us.' She looked at me in stunned silence verging on disbelief – or was it disappointment? It doesn't matter – I had her in a trance and I had found their joint state of entrancement. Two-and-a-half years later – they report that they have never been as happy as a couple or individually than they are now.*

Working with a couple's trance state and whatever form it takes seems to be helpful at times; working separately from the trance state is also helpful at times. The ability to move in and out of trance as a therapist is critical.

*Deep into our work together, I noticed that while the wife dominated sessions, the husband would respond to her by making subtle movements and noises with his mouth; both them were completely unaware of this - consciously. I brought this to their attention and I asked him to make conscious his unconscious experience and response. As he did this he gained a break in the trance and a sense of differentiation – and so did she.*

In the psychological literature, romantic relationships have long been acknowledged to require a level of attachment that is to a large part unconscious, or trance-like. Our attractions, connections and dynamics in romantic relationships are powerfully elicited by our partner, much like a therapist's questions and suggestions under hypnosis. Romantic relationships have the power to tap us back into our first experiences of love more directly and deeply than any other kind of interaction with people. This is why these relationships can be so painful, difficult and chaotic (Hazan & Shaver, 1987; Ferguson, 2002).

Attachment theory emphasises that our earliest experiences with caretakers teaches us what to expect in intimate relationships, from which we form mental representations or 'working models' of relationships (Hazan & Shaver, 1987; Van IJzendoorn, 1995, cited in Schneller, 2003). These working models are the keys to our problems of security and intimacy as adults. A securely attached child, for example, will grow up believing that they deserve to be and will be loved. This person will tend to form secure long lasting relationships easily as an adult. An avoidant child by contrast will tend to become an avoidant adult, distrusting people and fearing intimacy. An anxious or ambivalent child will grow up seeking love but fearing rejection. In extreme cases, we are unlikely to automatically be able to conduct a functional relationship if we did not experience one as a child. This typically requires therapy (Ferguson, 2002).

An early romantic relationship can also become a source of later compounding problems. We make decisions and form opinions during these phases of development that are typically based on painful emotional experiences. It can be difficult for adults later in life to recognise that their reactions in relationships now have their roots not in what is happening in this relationship, but in these earlier times when they were first forming opinions about themselves, other people and the world (Wright, 1995). We make these decisions quite consciously and then forget that we've made them – they become subconscious and will only be elicited under trance.

*A case example of this was a woman in her mid-thirties who had been single since her late twenties. She was mystified as to why she remained painfully shy and unable to attract or engage a man in romantic or sexual way.*

*In recounting a painful first love relationship that ended when she was 21, Lucy recalled being very confident before that relationship ended. Under hypnosis she remembered deciding quite consciously at the end of the relationship that she would for the foreseeable future throw herself into her university degree and to forget about men for a while. That 'while' had simply continued subconsciously for 14 years – with no new decisions being made.*

Not all couples that enter therapy are fully committed or become fully committed to do the subconscious work required. A common form of resistance is to stay focused on the other and on blaming the other. These people typically report not feeling anything or only experiencing benign and happy memories or states, thus attempting to prove that it must be their partner who has the problem (Wright, 1995).

*A case example was a couple in their late 40s with two daughters. Early on he declared that he had no problems – that if she could only be happy and treat him properly all would be ok between them. She however complained of his temper, which he did not deny and even seemed proud of. If only because he had already been divorced and had children from a previous marriage, this man persisted with the process. In one early session we did a hypnosis based on Loquate's work with Imago Theory, where a couple is jointly hypnotised and re-experiences their earliest memories of love – those first love stories between their parents and themselves. This man reported only good experiences, while his wife sat silent, in subtle tears throughout the hypnosis. He continued several more sessions that hid a very frightened inner child. Eventually his wife found the strength to stand up to him sufficient that he became suddenly enraged, swore at her vehemently wrenched the door open and swept out of the room, slamming the door behind himself. 'That's what he always does', she reported.*

*About two months went by, with the woman continuing therapy much to her husband's astonishment. Eventually she told him that she needed him to go back into therapy with someone, if not with me. He had been blaming me for the incident - which suited me for the time as it meant he could stay with his marriage. Eventually he reported that he would only see me. In our first session*

*back I explained that while such outbursts if they continued would impede our progress severely, something good had resulted, in that I had been able to see the whole dynamic play out and we could all now unravel the subconscious feelings that built up as they both escalated. That this was their dance and that they each brought their own love stories to it. Once I finished talking there was a distinct sense of trance between the three of us. We have proceeded very constructively since and the couple has consistently reported getting on well together and being aware of their own feelings when they sense conflict in their relationship. There have been no more violent outbursts in or out of session.*

People repressing and defending their emotions, they are typically so locked into their current conscious emotions – their anger, guilt, rejection, jealousy or fear of the future to be able to take an impartial view at the ‘self’. The role of repressed childhood emotions in marriage and relationship failures is enormous. Without intervention, people continue to repeat these patterns, going from relationship to relationship always acting in the same irrational ways (Ferguson, 2002; Wright, 1995).

### **Negative entrancement**

Romantic love has also long acknowledged the need for idealism of the other, or for enchantment (Arndt, 2000). Yet attractions can become ‘disenchanted’ because of contradictory dilemmas faced by those in intimate relationships (Felmelee, 1998). Ambivalence is the presence of at least moderate amounts of positive and negative attitudes regarding partner attributes and has been found to be a predictor of break-ups, over and above feelings of love for a partner, or the incidence of conflict in the relationship. Its effect has been found to be moderated by individuals’ commitment to their relationships. Ambivalence acts as a catalyst either facilitating or impeding the growth of intimacy (Thompson, 1995). Other theorists concur on the need for couples to learn to live with negativity and ambivalence, and even to see virtue in faults (Harvey & Weber, 2001).

Entrancement in relationships can take a very dysfunctional form. Indeed, romantic addictive enmeshment has been said to be ‘the result of what is experienced as irresistible pulls from hypnotic entrancement’ (Feeney, 1999). In the psychological literature this would probable equate to the phenomenon of ‘fatal attraction’, where ‘fatal’ refers to the relationship being doomed from the beginning. Eventually the very ‘qualities that are disliked in a partner, and that are implicated in a break-up are often very similar to those that were found to be initially attractive. These ‘disenchanted attractions’ occur because of contradictory dilemmas faced by those in intimate relationships (Felmelee, 1998). Brickman (1987) suggested that the integration of negativity is the greatest challenge of intimacy (cited in Thompson, 1995). Hypnosis is an obvious modality for this kind of change to the thought patterns and belief systems.

### **Calof’s case study**

Calof (1998) recounted a case study where he assumed a premise that each person in a long-term relationship has unconscious knowledge of the other: 'this includes shared memories not consciously remembered; words spoken but long forgotten; and intuitive understandings built on years together. Research shows that couples constantly give each other little physical clues as to how they are feeling and that this information is absorbed by the other – often subconsciously.

This couple had reached a stalemate in a long marriage that seemed doomed. Floyd was a big fellow and somewhat aggressive, Judy was diminutive, submissive and manipulative. After inducing a trance state in both, Calof recited a long parable about two small nations with a long history of war- one seeming more powerful than the other, with more resources and a bigger army, but the other army quicker and more agile. So the two nations were in fact equally matched. Mean while the war was exacting a terrible toll on both countries as each side refused to capitulate, believing itself correct. As conditions worsened and each country longed for a resolution, secret meetings were held between them at the highest level of government. Eventually the two governments agreed that on the stroke of noon on a given day truce would be declared. And so it was that on this day a cease fire was declared, with a signing, flags and military bands playing. Their speeches declared the benefits of joining their resources and that while strong in war they would be stronger together in peace. The two prime ministers embraced.

Calof gained their agreement to work on an extremely important 'mission' – that they would consider over next two weeks. They would return in two weeks at the same hour and upon his signal Floyd would become Judy and Judy would become Floyd. By keeping the knowledge out of consciousness, he gave their unconscious minds room to work unimpeded.

In the second session Calof addressed each separately as to the mission and gained their consent to proceed. Calof suggested to each of them that they would feel themselves becoming the other, beginning to think, act and feel like the other, having their feelings, thoughts, beliefs and sensations. That while they were being the other, they would forget their own feelings, thoughts, beliefs and sensations and will believe themselves to be the other. H suggested that when they returned to themselves, they would bring back the wisdom and deep learnings they had made.

When Calof finally asked the couple to open their eyes and to switch chairs. Remarkably – Judy rose heavily as if she'd suddenly gained weight; she lumbered to the neighbouring chair and dropped heavily into it. On her normally smooth forehead – lines had appeared. Floyd meanwhile sat down gracefully crossing ankles, folding hands in his lap and parting his lips in a manner unmistakably Judy's. As soon as they had taken each other's seats a muted fracas began – they argued in monotone the restraint of a deep trance. Their argument was virtually word for word the same as at their first session – only in each other's shoes. Finally they were able to experience each other's dilemmas. The couple came out of the trance saying that they never doubted that their marriage would not fail and they went back into their lives happily ever after.



Floyd called Calof six months later to say that their sex life had improved dramatically and to ask if he had done something under hypnosis. Calof put the question back to him – asking why he thought it had improved. Floyd said that he and his wife had found more of their opposite gender side but did not know why.

Calof admitted that the authoritarian approach that he had used with this couple worked well because it masked his own insecurity of using hypnosis with a couple for the first time but that he would not be so authoritarian again. Calof mused though that, ironically, his current more balanced approach would probably have failed to work for Judy and Floyd because it was too similar to what they had already tried between themselves.

## CONCLUSION

The recent psychological literature is filling with references to the term ‘engagement’ between couples. Engagement seems to be replacing the more traditional term of ‘attachment’ between couples. There is a long line of research into the need in modern marriages for a balance between, on the one hand, independence, differentiation and self reliance, and on the other hand, the ability to merge as a couple, to have engagement, idealisation or entrancement between a couple (Schnarche, 2000). Hypnosis can help therapists to focus on couple behaviour in a non-pathological and future orientation that is more congruent with the future directions in mental health of clients becoming more proactive in their own ability to survive and thrive as individuals and in relationships (Kershaw, 1992).

The implications of these findings for therapeutic interventions are significant. The experience of relationship and marital dissolution is a common reason for individuals to seek therapy. Marital life is more complex today and represents a significant challenge for couples and the rapists. Couples must continue to develop their relationship skills in order to survive, yet individuals are experiencing unprecedented pressures and time constraints (Goldberg, 1985). Hypnosis can provide an efficient intervention as part of a comprehensive therapeutic process for couples.

The findings discussed here suggest ways that therapists might continue to formulate intervention processes, based on an increasing understanding of the complexities of the trance states that exist between a couple, and within the therapeutic setting. Educational programs can also be informed by these findings, and in particular, there may be calls for the development of more training and education in the use of couple hypnosis. Finally, further research is needed to support the usefulness of the theories posed here and to more fully examine the interpretive processes that individuals and couples undergo as part of hypnosis.

## Disclaimer

All case examples have been modified or are amalgamations of many cases such that the identity of the people has been kept confidential.

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