

### **The Marriage Clinic Casebook**

Julie Schwartz Gottman (ed.). New York: W.W. Norton & Company ([www.wwnorton.com](http://www.wwnorton.com)).  
2004, 237 pp., \$32.00 (hardcover).

Working with troubled couples can be a major challenge for even the most experienced and skilled clinician. By the time most couples seek treatment, their relationship has been seriously damaged and they are stuck in a long-standing cycle of unremitting conflict, mutual blame and entrenched defensiveness. Often, there are associated problems such as drug and alcohol abuse, violence, infidelity, and depression. Many troubled couples have all but given up on their relationship and desperately look to the therapist to produce a miracle cure or at least demonstrate that positive change is possible and that the relationship has a future.

In order to deal effectively with these challenges, therapists need to be well grounded in a practical, well-structured approach that can produce healthier couple interactions in a relatively short period of time. The Gottman Method Couple Therapy (GMCT) is just such an approach. GMCT is an outgrowth of John Gottman's pioneering laboratory research in which he studied how successful couples and troubled couples behave in problem-solving situations. Among his findings were that successful couples do not necessarily argue less frequently than troubled couples, but they know how to limit damage during arguments by avoiding what Gottman calls the "Four horseman of the apocalypse": criticism, contempt, defensiveness and stonewalling. He found that during conflicted interactions, successful couples display at least five times as many positive as negative behaviors creating what he calls a positive sentiment override (PSO). Over time, PSO produces a wellspring of good will that cushions the relationship during difficult times.

The Marriage Clinic Casebook, edited by Gottman's wife, Julie Schwartz Gottman, is an inside look at how GMCT works in the hands of experienced practitioners. The first chapter outlines the principles that make up the "Sound Relationship House" theory on which GMCT interventions are based. These include a mutual awareness of the partner's internal world, the voicing of care and respect between partners, the positive and active response to interaction bids, a predominantly positive affective atmosphere, and skillful management of solvable problems, creating a dialog with perpetual problems, and creating shared meaning. In the remaining chapters, experienced practitioners of GMCT, present a case illustrating their work with a highly distressed couple. The presentations are generally well written and contain sufficient detail to enable the reader to understand the couple's history, the nature of the problems facing the couple, and the challenges facing the therapist. Among the problems addressed in these cases are trauma-related domestic violence, extramarital affairs, spousal depression, intense emotional instability, sexual dysfunction, severe emotional distance, stepfamily issues, and parenting problems. The one glaring omission in this book is a case of a distressed same sex couple.

While GMCT is not a manualized approach to treatment, there is a distinctly structured and orderly process that is evident in all the case illustrations. At the same time, these cases illustrate how important it is for therapists to be flexible in order to tailor interventions to the unique requirements of each couple. While it appears that GMCT is a powerful form of intervention, it is not always clear from these case presentations to what extent progress is a direct function of the particular therapeutic method and how much is due to non-specific factors such as therapist warmth and encouragement, or the skillful timing of an astute interpretation. Nonetheless, most of the chapters include verbatim dialog so that one can see the GMCT method in action.

I recommend this book to all clinicians who work with couples. It seems to me that GMCT techniques are compatible with most models of couple therapy, but particularly those that are behaviorally oriented. Those who do not currently practice GMCT will learn enough from this book to be able to incorporate in their own work some of the techniques described in these cases. I suspect many will be impressed enough with the obvious efficacy of GMCT that they will want to learn more about this model. Experienced GMCT practitioners will be interested to learn how other GMCT therapists handle difficult cases.

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