

## REVIEWS

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Singer, J. A., & Skerrett, K. (2014). *Positive couple therapy: Using we-stories to enhance resilience*. New York: Routledge, 183 pp. \$39.95 softcover.

In the classic Beatles' song *Come Together*, the lyrics suggest that, "one and one and one is three." This catchy refrain underscores a major theme in *Positive Couple Therapy: Using We-Stories to Enhance Resilience*, two committed partners must cultivate an essential third entity, known as their "we-ness," or a shared sense of mutuality or "thinking and acting with the best interests of the relationship in mind" (p. xv). Written by Jefferson Singer and Karen Skerrett, this strength-based book is organized into an introduction and seven chapters. In the introduction of the book, the authors (who are not married to each other) share personal stories from their own marriages to convey the importance of "we-stories" as a strategy for creating a "we-ness" and to set a refreshing tone for the research-based, therapy-tested advice that follows.

In chapter 1, the Singer and Skerrett define a we-story as a shared story between members of a couple that defines or guides their relationship. Building on contemporary approaches to couple therapy such as Integrated Behavioral Couple Therapy (IBCT), Emotion-Focused Couple Therapy (EFCT), Narrative Couple Therapy, and Gottman's Sound Marital House, the authors propose that creating a we-story involves a "couple first" (p. 22) shift in individual consciousness and a prioritized sense of "we-ness" that they describe as having seven fundamental elements (i.e., security, empathy, respect, acceptance, pleasure, humor and shared meaning and vision). Using this framework, in chapter 2, the authors examine the power of we-stories in shaping a couple's mutual identity, providing meaning and purpose in their life, guiding their current interactions and future growth, and transmitting their wisdom and legacy.

Following these chapters, Singer and Skerrett provide practical steps, detailed case examples, and numerous therapeutic exercises for assessing we-ness and creating positive we-stories with couples. In chapter 3, they focus on how to assess couples' initial levels of we-ness using a brief 10-item measure called the Marital Engagement-Type of Union Scale to ask about mutuality in ten major life domains (e.g., domestic duties, financial matters, sexual intimacy, and future planning). Chapter 4 outlines ways couples can cultivate positive we-stories using a four-part we-story intervention process. As part of this intervention process, the authors include practical suggestions for couples on how to listen, create a climate of positivity, and discuss, "What can we do to make this better?" with an emphasis on mutual solution talk. Then, just when the reader might be wondering if it is really that easy, chapter 5 addresses "stuck stories" and illustrates how to help battle-weary couples overcome past hurts and resentments to locate stories of compassion that can break impasses and uncover a stronger sense of we-ness. Here, they use techniques of reframing, imagery, reverse role-play, family sculpting and empty chair to open up possibilities for new we-story construction.

After these chapters, in chapter 6, Singer and Skerrett highlight key developmental processes unique to couples (e.g., childrearing, launching, empty nest as well as aging, illness, and job loss), as they relate to their we-stories and we-ness. Using a systemic/intergenerational lifespan perspective, the authors offer valuable questions that therapists can use to help couples discover developmentally specific we-stories, which can be used to further create we-ness across the life cycle. The authors' effective use of poetry, case examples, and age-related questions skillfully clarifies the many life transitions that couples face from early adulthood to older adulthood. Finally, in chapter 7, Singer and Skerrett come full circle by concluding with a passionate appeal to "give the "we" away" (p. 171). Here, they encourage therapists to help couples extend their we-ness beyond themselves. They offer poignant examples of couples that shared their positive we-stories and we-ness with their children, colleagues, friends, and neighbors through resilient family rituals, mutual support groups, and volunteer activities.

In addition to this inspiring “we-worldview,” there is much to like about a book that is so consistent with its message. The authors model a positive we-ness in their collaborative writing style and voice. They present realistic and diverse case examples of young and old, opposite and same sex, polite and profane couples from all walks of life. And thankfully, they avoid the “don’t worry, be happy!” cliché in favor of a richer, more complex view of achieving couple positivity that includes states of difference, curiosity, interest, pride, ambivalence, hope, anger, amusement, awe, and wonder.

In terms of limitations, Singer and Skerrett are forthright in suggesting that the we-story approach may not be appropriate for more distressed couples with problems such as “infidelity, domestic violence, repeated emotional abuse, substance abuse, longstanding deceit . . . or if one partner is suffering from a significant psychological disorder” (p. xvi). In addition, they state in chapter 3 that couples must commit to twelve focused sessions, which may not be possible for all couples in many practices. Another minor concern is the authors’ use of the phrases “good enough we-story” (p. 56) and “good enough talk” (p. 90) which, although intended to avoid perfectionism, may imply settling for less than desired for some couples.

Despite these limitations, this brief but valuable book would be a good supplemental text in a couple therapy course, a useful assigned reading in marital therapy supervision, or a helpful guide for therapists and clients in couples treatment. Who knows? If Singer and Skerrett had written *Positive Couple Therapy* back in the 1960s, perhaps the popular Lennon and McCartney chorus would be, “Come together right now over we.”

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