

# What Does It Mean to Be Relational? A Framework for Assessment and Practice

RACHELLE SILVERSTEIN, M.S.†  
LINDA BUXBAUM BASS, PH.D.‡  
AMY TUTTLE, PH.D.§  
CARMEN KNUDSON-MARTIN, PH.D.#  
DOUGLAS HUENERGARDT, PH.D.#

---

*The authors begin with a question regarding how to better draw upon relational thinking in making case assessments and treatment plans. They first address issues regarding the cultural construction of self and relationships, integrating women's psychology, family systems, and collectivist culture literatures within a discussion of power. Then they present a heuristic framework for how individuals orient themselves within relationships that includes two dimensions—focus and power—and evolves out of the social context. From these two dimensions, a typology of four basic relational orientations is presented: position directed, rule directed, independence directed, and relationship directed. Case examples from couple's therapy and suggestions for practice are provided.*

*Keywords: Couples Therapy; Relational Therapy; Assessment; Social Context; Gender*

*Fam Proc 45:391–405, 2006*

**F**amily therapists organize practice around the idea that relationships are central to health and key to treatment. What it means to be relational is therefore important to the ongoing evolution of the field. Yet, as Gergen (1994) noted, “at present we possess a staggering vocabulary for characterizing individual selves but stand virtually mute in the discourse of relatedness” (p. 214). This article addresses how to conceptualize individuals relationally. We focus in particular on how people orient themselves to others and how to apply these ideas in relationship therapy across varying gender and cultural contexts.

---

†Doctoral student in marital and family therapy, Loma Linda University, Loma Linda, CA.

‡Adjunct faculty, Department of Human Development, California State University, San Marcos.

§Assistant professor of counseling and family therapy, California State University, Chico.

#Professor, Department of Counseling and Family Sciences, Loma Linda University, Loma Linda, CA.

Correspondence concerning this article should be addressed to Carmen Knudson-Martin, Department of Counseling and Family Sciences, Loma Linda University, Loma Linda, CA 92350, Tel: (909) 558-4547. E-mail: cknudsonmartin@llu.edu

## CULTURAL CONSTRUCTIONS OF SELF AND RELATIONSHIP

A large body of research documents differences in Western and Eastern conceptualizations of the individual. Three aspects of a self-concept are typically distinguished: individualist, relational, and collectivist (Kashima & Hardie, 2001; Kashima, Kashima, & Aldridge, 2001). The individualist self is correlated with personal agency and goal-directed behavior; a relational self is more oriented toward maintaining relationships with particular significant others; and a collective self is subsumed within the context of a larger group or community. In this article, we offer a framework, incorporating each of these perspectives, for understanding how self is oriented to other.

### Relational Focus in the Literature

Literatures differ regarding what it means to be relational. In women's psychology, connection with others is fundamental to most women's self-concepts (e.g., Chodorow, 1978; Goldberger, Tarule, Clinchy, & Belenky, 1996; Jordan, Walker, & Hartling, 2004; Josselson, 1987). Women organize themselves in the context of important relationships and strive to maintain a sense of connectedness with others. From a family systems perspective, every individual is relational. There is always a relational meaning to personal actions. We cannot *not* be relational; all language and behavior can only be understood within the relational context (e.g., Bateson, 1972). On the other hand, being relational in collectivist cultures means being other-directed and cooperative, accommodating oneself to the whole (Parks & Vu, 1994). Hierarchy is valued as a way to facilitate communication through the recognition of various social levels and roles (Hall & Nagayama, 2003).

Though from a systems perspective all human action is relational, not everyone experiences this the same way. Western ideology focuses on individual goals, autonomy, and negotiating needs. However, women may define their own needs as including those of others. Similarly, persons from collectivist cultures are more likely to give priority to the needs of the group rather than individual interests (Gao, 1998). Taken together, these varying relational ideas create a rich dialogue regarding how people connect and relate to others. As separate frameworks, none is complete, the diversity of relational experience is difficult to see, and change from one way of relating to another is hard to conceptualize.

Models of self also tend to minimize or mask the power relations embedded within relational systems. For example, family systems have been known to minimize issues of power and hierarchy (e.g., Goldner, 1989; Knudson-Martin & Mahoney, 1999). Power may also be masked in collectivist societies that operate on hierarchically ordered systems in which persons implicitly know their roles and service to the group. In such circumstances, power is latent in the social organization such that personal needs may never come to the surface or be expressed (Komter, 1989).

### Culture as Politics and Performance

The framework presented here is an effort to move away from culture as an "add on" (McGoldrick, 1998), in which diversity is conceptualized as differences from the dominant culture. In that view, basic developmental and family processes are framed within the dominant discourse, and discussions of special ethnic variations follow, inadvertently creating a class of "other" (Knudson-Martin & Laughlin, 2005). In-

stead, we see culture as a primary guiding context through which relational processes evolve. This means that relational orientations grow out of, and are invited by, the particular cultural contexts in which they are embedded (e.g., Falicov, 1998; Hernandez, Almeida, & Dolan-Del Vecchio, 2005).

Gender is a core category through which culture is experienced and interpersonal meaning is defined (Kimmel, 2004). According to Kimmel, much of what we think of as gender differences is more accurately understood as differences in domination. Power is structured into gendered relationships through cultural practices and expectations, even when not intended (Komter, 1989). Komter noted that this power stratification in relationships is often invisible or latent. Invisible power prevents issues from even being raised. For example, a wife may automatically accommodate her husband's wishes. Latent power comes from social values that limit what can be seen or imagined as possible. To the extent that people absorb the dominant discourse and take on roles associated with them, power has institutional and personal aspects (Lips, 1991). Because we are in a period of rapid social change, it is not unusual to find ideals of equality mixed with behaviors that unintentionally promote inequality (Knudson-Martin & Mahoney, 1998).

Other systems of stratification create similar processes. For example, Mahboubi and Searcy (1998) described how racial hierarchies created deference and attention toward Whites in their community. "The African-American family knew a great deal about the history of the Anglo family, whereas the Anglo family had virtually no awareness of the life of the African American family, except as the African Americans provided care" (pp. 234–235). Thus, the focus and orientation toward others depended on the racial categories of the persons involved. Stratification within the larger society helps to construct the cultures within. As a result, African American women may take an independent position in relation to men or protect their sons because opportunities for Black men in society are limited (Boyd-Franklin & Franklin, 1998).

Because culture arises out of and within societal contexts, we find it helpful to view it dynamically—that is, as something performed, played out, and changing depending on the circumstances and individual experiences and interpretations (Laird, 1998). Persons who live on the margins of the dominant culture develop a perspective on both their own culture and the dominant one. How they perform culture may depend on the situation and change from one setting to another.

Culture is also political. "All people do not have equal voice in shaping their personal narratives, nor do all people have equal opportunities to have their particular stories prevail" (Laird, 1998, p. 28). Thus, although culture is meaningful at a personal level, it cannot be understood apart from power. As power relations change, people orient themselves to each other differently. Culture is therefore always contextual and always emergent. Even as it plays a significant part in shaping relational orientations, it is also fluid, constantly in revision, and open to change.

### **A RELATIONAL ORIENTATIONS FRAMEWORK**

Relational orientations are internal ways of experiencing oneself in relation to others. They arise in the context of the cultures and relationships within which one is embedded and are made visible as people communicate through language and action. Because relational orientations and their interpersonal dynamics are fluid, they can be changed or modified and may thus be a focus of treatment goals and interventions.

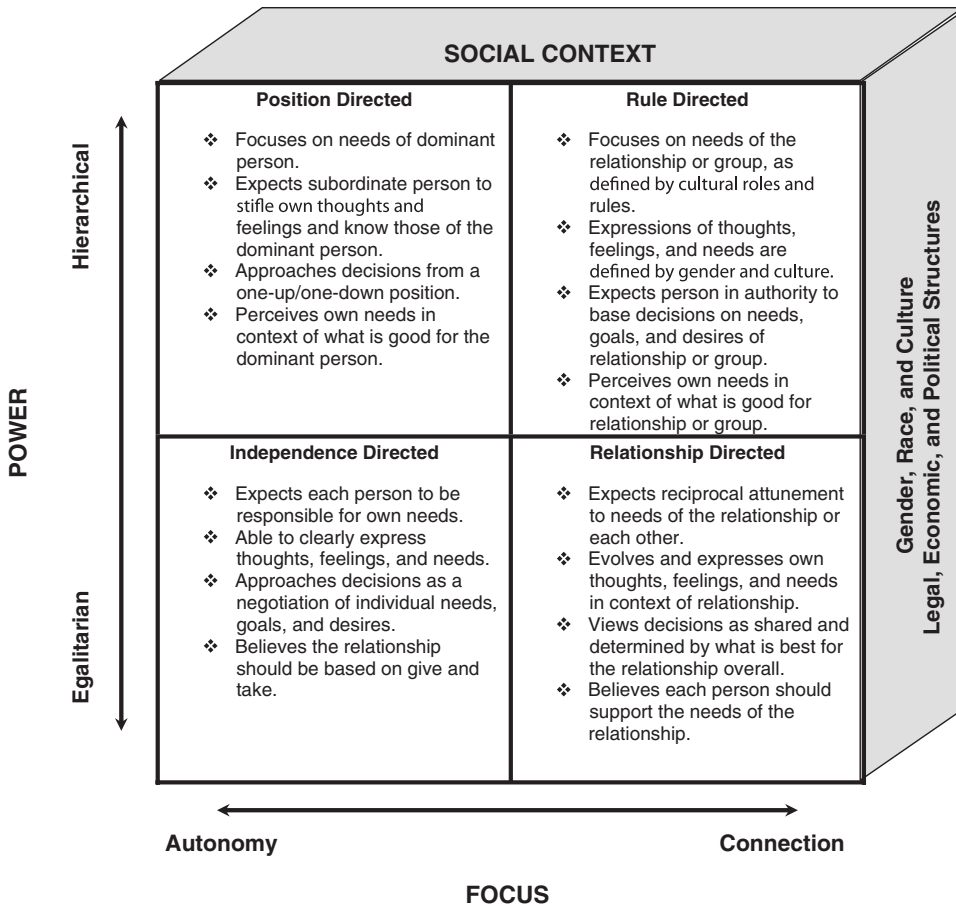


FIGURE 1. A Typology of Relational Orientations

To categorize relational orientations, we needed a way to think about the intention or purposes influencing action and to develop guidelines and questions that would assist with this process. We also wanted to account for the fact that partners and family members do not necessarily share the same relational purposes. Informed by the various meanings of *relational* in the literature and our own observations, we found it helpful to categorize relational actions according to two dimensions (Figure 1). The focus (horizontal) dimension represents the degree to which relational purposes are oriented toward the self (autonomy) or toward relationships (connection). The power dimension (vertical) has to do with whether relationships are experienced as egalitarian or hierarchical.

**Social Context: The Invisible Dimension**

Behind the outward expression of relational orientations is the social context that invites and maintains them (e.g., Bronfenbrenner, 1979). This context includes influences that generally remain invisible, including culture, gender, race and ethnicity,

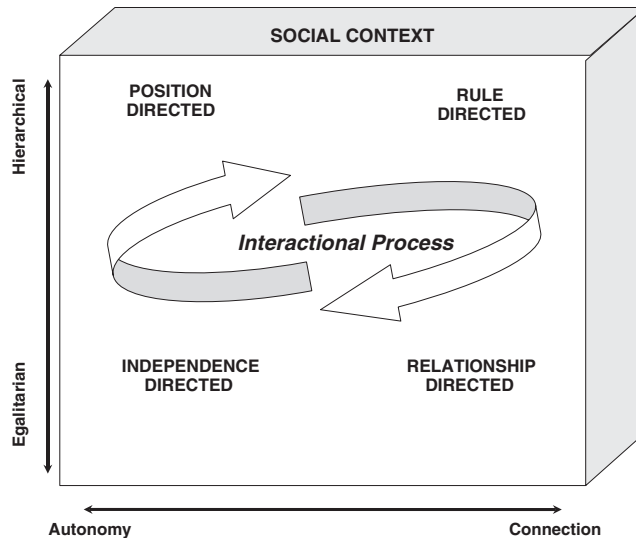


FIGURE 2. Fluidity of Relational Orientations

religion, and political, economic, and legal structures. As illustrated in Figure 2, relational orientations are not essential, unchanging characteristics of a person. People have the capacity to vary across each of these dimensions; what is expressed depends on the context.

### Focus

The focus dimension reflects how the self is experienced in relationships. It represents a continuum from a focus on maintaining personal autonomy to a focus on maintaining connection. On the autonomy end of the continuum, the goal is to attain clarity about one's own experience and to make relational decisions based on awareness of one's own needs and interests. This is different from selfishness; rather it is an orientation grounded in Western tradition that prioritizes the autonomous functioning of individuals and equates maturity with rational decision-making based on awareness of one's own needs and interests. Relationships promote individual well-being and require the management of competing interests.

On the connection end of the continuum, personal experience cannot be separated from relationships. Maintaining connection becomes the primary focus. This is not a self-less orientation; rather, relationships are the basis for self-experience.

### Power

The power dimension addresses hierarchical and egalitarian positions that are defined by power in relationships and in cultural roles and rules. On the hierarchical end, people are in a one-up or a one-down position in the relationship. Relationships are hierarchically determined and defined, and the relational goal is to determine one's position. A person may be in a dominant position in one context and subordinate in another.

On the egalitarian end, there is equality in relationships. It is expected that decisions will be made individually or mutually. An egalitarian orientation attempts to minimize power differences. However, because of hidden and covert aspects of power, hierarchical orientations may sometimes be under the surface or beyond conscious intention.

### **Typology of Relational Orientations**

From the focus and power dimensions, four basic relational orientations emerge: rule directed, position directed, independence directed, and relationship directed. Because this typology, like all typologies, is an artifact created by our analytic process, we do not expect that persons necessarily fit neatly within one category. In fact, it is the movement and variations as persons interact (Figure 2) that are the most interesting from a relational perspective. The “types” and case illustrations described next are generic and help to clarify an overall heuristic framework for understanding and determining relational orientations.

*Rule directed.* Rule-directed persons (high hierarchy and high connection) view themselves in the context of their responsibilities to the group within socially defined roles and rules. This orientation is common in cultures that take a collectivist view of relationships. Cultural rules direct the distribution of power and authority and determine who is responsible for making decisions. Powerful persons are expected to use their authority for the common good. Rule-directed persons subordinate individual goals and interests for the common good, and personal well-being is dependent on accountability to the group.

When each person operates from a rule-directed orientation, relationships tend to be stable, with the powerful person oriented toward the well-being of the group/family. These relationships embody a sense of shared vision and common direction that simplifies decision-making processes and minimizes conflict. However, individual well-being, particularly of subordinates, may be sacrificed. Problems emerge when power or authority is abused or challenged. Responding to personal or societal change can also be difficult and may result in a shift toward position-directed or relationship-directed responses.

Juan, a 33-year-old Mexican American man, illustrates a rule-directed orientation. Juan has been married for 5 years to Louisa, a 25-year-old Mexican American woman. They have a 10-month-old child, and Juan’s elderly disabled mother lives with them. Following cultural rules, Juan is the sole provider for the family. Juan makes decisions based on cultural expectations and his idea of family needs. His family’s needs include those of his wife, child, mother, and extended family members. For example, Juan decided that Louisa would stay home and care for their child and his mother. Louisa does not challenge Juan’s decision.

*Position directed.* A position-directed person (hierarchical and autonomous) feels either one-up or one-down in relationships. Therefore, determining, maintaining, or changing one’s place in relation to others is important. In contrast to the emphasis on the group in the rule-directed orientation, the position-directed orientation derives from an individualistic context in which people are supposed to know themselves and represent their own interests. Problems emerge when there is a struggle for power as each person attempts to protect his or her interests by controlling others.

Frequently one person (often a woman) takes a subordinate position in order to maintain stability. This requires that subordinates express their needs and interests indirectly or assume that their needs are not important. On the other hand, the dominant person expects others to accommodate and feels free to speak of his or her own experiences, but has limited empathy for others. Positions are directed not by clear cultural rules, but through individual positioning for power. There is a potential for abuse that seeks to limit the autonomy of others.

Alex, a 44-year-old White man, reflects a position-directed orientation. Danielle, a 38-year-old woman of Hawaiian descent, maintains a one-down position in relation to him. She complains about Alex's behavior to her friends but accepts her subordinate position as "the way things are." Alex is comfortable with emotional and physical distance and likes Danielle's attention and support. Last year, when Alex was offered a job on the East Coast, he decided that relocation was necessary and did not consider Danielle's plans to go back to work. Although Danielle was not comfortable with the move, Alex did not notice, and she did not feel free to express her concerns.

*Independence directed.* An independence-directed orientation represents the Western ideal, autonomy combined with an egalitarian view of relationships. Independence-directed persons approach relationships with awareness of their own needs and interests and, ideally, a respect for those of others. In well-functioning relationships, people manage competing interests through compromise and give and take. Problems emerge when individuality is threatened and a common, agreed-upon goal cannot be attained. For example, couples may not have developed the skills to think as "we" or examined what the relationship needs to survive. Unwillingness to get in each other's way can make the dependency inherent in relationships difficult. Power struggles may emerge. Individuals may not be able to merge themselves into a relationship for fear of losing personal control or independence.

Jacqueline, a 35-year-old Caucasian female, exemplifies an independence-directed relational orientation. Jacqueline, a university professor, is highly motivated and focused on her career. She is able to express and take responsibility for herself, her needs, and her feelings. Jacqueline views relationships as involving equality and fairness, and a sense of autonomy. However, her first marriage failed partially because her ex-husband thought she was too focused on herself and her career. Currently, Jacqueline is in a relationship with Robert, an investment banker who also operates from an independence orientation. Robert and Jacqueline respect and accept each other's professional goals and obligations. Though they compromise on basic relationship issues (i.e., where to eat or go for vacations), when talk of marriage comes up, one of them always deflects it. Making a commitment frightens them, and with their busy schedules, sometimes they feel like ships passing in the night.

*Relationship directed.* A relationship-directed orientation (egalitarian and connected) is similar to the self-in-relation view that evolved out of women's psychology and Stone Center research (Jordan et al., 2004). It also has much in common with the empowering relationship ideal suggested by Balswick and Balswick (1999) in their theological approach to marriage. From this orientation, people expect egalitarian relationships with shared responsibilities and commitment. Personal authenticity depends on experiencing connection to others, and empathy and accommodation to the other is expected and reciprocal. Responsibility for relationship maintenance is balanced between partners,

with each person making it a priority. Relationship needs are not separate from personal needs, enabling each to respond to the other or relationship.

In well-functioning relationships, attachment within and to the relationship enhances and facilitates personal well-being. Problems emerge when individuals limit authentic personal expression or when conflict is avoided and the relationship becomes devitalized. Though ideally, relationship-directed persons would welcome conflict as a means to better relational understanding (Fishbane, 2001), relationally directed persons may emphasize harmony at the expense of conflict. When relationships are not mutual, the relationship-directed person may carry more of the burdens for relationship maintenance, and relationship inequality may result.

Lelah, a 53-year-old African American woman, and June, her 49-year-old mixed-race partner, have been in a committed relationship for nearly 20 years. Both exemplify relationship-directed orientations. Each places high priority on the relationship, and if a problem arises, they may spend many hours sorting it through. They try to be open to conflict with the hope it will strengthen their relationship. June says she can't really know her own preference on an issue until she knows Lelah's response. Sometimes it is hard to make decisions because each remains "open" to the other.

### **Relational Assessment**

Assessing relational orientations can be done in a variety of ways. Figure 3 lists questions that can serve as a guide. They begin by asking the therapist to consider the client's place in larger social contexts. In cases in which the client is highly insightful, the therapist may opt to ask the questions directly to the client. In other cases, the therapist may use the questions as a guiding framework. For example, the clinician may focus on the process that is occurring between clients as a way to assess relational style through asking specific questions to each individual. The case described next illustrates how assessment of relational orientations helped conceptualize the case. It demonstrates how relational orientations are context specific and also shows that it can be valuable to help clients distinguish between their preferred orientations and what may actually be happening.

### **Always on Sundays**

Miguel and Ellen sought therapy for problems related to potentially violent episodes that occurred during and following Sunday visits by Miguel's family. Miguel was the first member of his Catholic Mexican American family to graduate from a 4-year college. Ellen graduated 2 years earlier with a master's degree in library science and works as a reference librarian at a local university. She is a German American with a strong Lutheran heritage. They are in their late 20s and have been married 15 months.

In applying the questions in Figure 3, the therapist determined that Miguel acts from a relational orientation with Ellen but shifts to a rule-directed orientation when his cultural messages about self and relationship become salient to him. Ellen says that he becomes a different person when his brothers, sisters, and their spouses come over on Sunday afternoons, at which time he begins to give orders as if she was nothing more than "hired help." She also claims that he is dismissive of her and their relationship on these occasions, saying in essence, "I have no value to you other than to make you look good to your family by getting all the food on the table while you

**Social Context**

What messages about self in relation to others are perpetuated by client's position in societal context?

- In what kinds of contexts is the client embedded? How have they changed over time?
- What messages about gender has the client internalized?
- How do socioeconomic status and economic situation impact constructions of self and relationships?
- How does the client's relationship with legal structures (immigration, justice system, and so on) impact constructions of self and relationships?
- How do the client's religion, age, race, ethnicity, and disabilities impact constructions of self and relationships?
- How much personal, interpersonal, and institutional power does the client experience as a result of his or her societal position?

**Focus**

How does client experience the self in relation to the other?

- Whose needs are the focus of attention?
- To what extent is the focus on what is good for the relationship overall compared with what is good for the self?
- Does client primarily focus on own goals, desires, and needs, or on partner's goals, desires, and needs?
- How likely is client to notice partner's needs and feelings?
- How likely is client to respond to partner's/family member's needs and feelings without being asked?
- How likely is client to focus on what is needed to maintain and improve the relationship?
- To what degree are client's perspectives influenced by the opinions or needs of partner/family member?

**Power**

How does client experience hierarchy and position in this relationship?

- How able is the client to express thoughts, feelings, and needs?
- How are client's expressions of thoughts, feelings, and needs influenced by cultural, religious, or gender traditions?
- To what extent are client's decisions determined by cultural, religious, or gender traditions?
- Whose interests are most reflected in major decisions?
- Whose interests and schedule organize daily schedules and routines?
- How are differences in opinion handled?
- Who is more likely to accommodate to the other person?
- How able is client to directly influence others?

FIGURE 3. Relational Assessment Guide

barbecue the meat and drink beer.” His actions were directed by his understanding of gender in his culture. For example, on the Sunday before their first appointment, she whispered to him while he was cooking the meat, “Remember, talk to me as if I’m your wife.” He responded by speaking harshly to her in front of his family, “I’ll talk to you any way I like. I’m the man in this family. Don’t forget that.”

She withdrew to their bedroom, embarrassed and overwhelmed by the turn of events. When the meat was cooked, Miguel came into the house upset that Ellen had not placed all the food on the table, embarrassing him in front of his family. Finding

her in the bedroom crying, he asked her to please place the food on the table. Ellen replied, "Put it on the table yourself, boss man." With that he picked her up and shoved her repeatedly toward the kitchen saying, "Put the food on the table now or this marriage is over." Stunned, Ellen complied.

As the therapist pursued an understanding of Miguel's relational orientation, it became clear that he generally prefers to be relationship directed. He has remorse over his treatment of Ellen and says that this is not how he wants to live his life with her. He says that he loves her. He also tells Ellen that he wants an equal relationship with her and recalls the disparaging way his deceased father treated his mother. He recognizes that he "loses himself when his family comes over." He experiences a need to fit with his family and culture when they are present. This is an example of the fluctuating relational positions that one may assume, depending on context. The gender and cultural performance does not happen at his mother's house or at the home of one of his siblings.

The therapeutic focus became one of Miguel's relational orientations. Is he the man who quietly speaks of equality and who places effort in fulfilling agreed-upon household chores and who generally treats her as an equal? Or is he the man who upholds his culture's traditional values and prioritizes the preservation of a masculine (patriarchal) role at all costs, even when challenged by his wife to remember to be her partner?

### CLINICAL APPLICATIONS

Beginning therapy with an inquiry into our client's relational orientation is helpful for all kinds of issues. Though we have models to assess families and couples as units and to assess individual functioning and personality, we have not previously had a framework through which to focus on individuals as relational persons. The following case examples illustrate how focusing on relational orientations helps couple's therapy.

#### **Position-Directed Husband, Relationship-Directed Wife**

Judy and Jon, a Caucasian couple in their mid-30s, exemplify one of the most common gender patterns. They sought therapy when Jon told Judy that he wanted a divorce because he did not love her anymore. Like many other White middle-class women, and in keeping with her gender socialization and cultural expectations for intimacy and mutuality in relationship, Judy oriented herself toward connection within an egalitarian marriage. However, in an effort to preserve the relationship, she stopped expressing her concerns or problems. She tried to discern what he wanted, but took care not to upset him. Paradoxically, in an effort to maintain the relationship, she withdrew herself from it (e.g., Brown & Gilligan, 1992).

Jon, like many White middle-class men, was position oriented. His socialization had taught him that one is either up or down in relationship and that he should protect his independence and be the one who is in charge and correct. He experienced many of Judy's efforts to connect with him as criticism. He found her attempts to mollify him irritating.

An important intervention in this case was tracking what happened as Judy and Jon interacted from their different relational orientations. A power difference that limited Judy's personal expression and reinforced Jon's assertiveness became visible and could

be named. However, as the therapist helped the couple explore their ideals about relationships, it became clear that both partners held egalitarian ideals. When made visible to him, Jon did not want the power to limit Judy's expression. As therapy challenged the power inherent in his hierarchical orientation, Jon began to respond to Judy in more welcoming ways, and Judy learned to be less intimidated by Jon's responses.

### **Rule-Directed Husband and Wife**

This example illustrates how the power dimension can be hidden, yet problematic, among traditional couples directed by cultural rules and roles. Though Wong Lu (Chinese ancestry) and Maria (Greek heritage) came from different ethnic traditions, they shared a similar set of traditional rules and roles based in their deep commitment to their Christian faith. Though both Maria and Wong Lu had graduate-level professional degrees, they agreed that Wong Lu was "leader of the family" and that Maria's full-time job was taking care of the children.

Maria sought therapy because she felt depressed and powerless. She wanted more equality in her marriage but questioned whether this was a realistic expectation. She believed that the Bible required women to be submissive to their husbands, but she thought that her husband was not correctly playing his role. She saw his job as leader of the family as taking the other family members into account when making decisions for the family. Maria believed that she had knowledge to contribute but was uncertain whether her ideas were appropriate within their religious community.

Wong Lu described their partnership as "teamwork." "Each person has a role to play," he said, "and each role is equally important." He did not associate hierarchical power with his role. Yet Maria organized family life around his needs and schedule, and Wong Lu accepted this privilege without conscious awareness of what it cost his wife and children.

First, the therapist helped Maria examine her own faith beliefs in relation to gender equality. Maria decided that "God would not have given me a mind if he did not want me to use it." Moreover she reasoned, "God was caring—more like a woman than a man." But because both she and Wong Lu oriented themselves within the rules of their faith, changes in Maria's personal faith system had to work within their religious community.

To this point, Maria had kept all her concerns separate from people at the church. The therapist asked Maria who in the church was most likely to understand. Maria picked a woman she trusted and agreed to talk with her. When she returned the next week, Maria had begun conversations with a number of women in the church, and her understanding of the community rules had begun to shift. She reported, "all the women in the church feel the same way I do." Now she felt free to address the issue of equality without feeling that she was violating her faith. Gradually the couple was able to reshape their relationship to allow Maria a stronger, more genuinely valued voice. Though Wong Lu retained the role of "leader of the family," he learned to be more attentive and responsive to family members in carrying out his role. Attention to how change in the couple relationship would be received within the larger church community was a critical piece of the therapy.

### **Value of the Framework**

The above examples suggest a variety of reasons for incorporating an assessment of relational orientation into therapy. First, exploring relational orientation helps

therapists recognize the relational meanings that each person brings to the issues at hand. This can open conversation that can help clients become more aware of the ways they construct themselves and interact within relationships, and can help clarify goals and preferences regarding relationship orientations. This may be particularly important when attempting to understand persons from diverse cultural and religious backgrounds and may help identify other persons who need to be included in the therapy process.

Second, making a relational evaluation brings to light hidden issues of power, gender, and inequality. Without such an inquiry, these issues are easy to miss. Frequently power and gender issues are hidden, invisible to the clients themselves and beyond their conscious awareness. The typology provides a framework from which therapists can introduce education about these issues into therapy and can ask questions that they may not otherwise address. Questions regarding how relationship decisions are made, who accommodates whom, how needs are expressed, and how partners influence each other make visible the power factors that influence relationship decisions and processes. Often people express egalitarian values but need help being able to attain them (Knudson-Martin & Mahoney, 1999).

Third, therapists can teach clients about the typology and use it to map the various relational orientations among couples and other relational units such as friendships, relationships at work, parent-child relationships, and even therapist-client relationships. They can use the information to assist in creating goals, identifying sources of problems and misunderstandings, negotiating changes, and tracking changes and progress. This approach can help reduce blame and create a shared vision of what the clients are working toward, or identify ways in which their relational goals and orientations differ.

And finally, for many persons, the desired outcome of therapy is a change in relational orientation. The typology provides a framework for making sense of shifting orientations as clients struggle to deal with the issues in their lives. For example, Tony sometimes used each orientation. When threatened in his current relationship, he would shift back to the position-directed orientation he learned as an abused child. More commonly and as part of his healing, he had taken an independence-directed orientation that focused on maintaining his autonomy. However, his Mexican American rule-directed roots pulled him toward wanting more connection. His goal in therapy, which he often achieved, was to be more relationship directed (i.e., connected and egalitarian) with his partner and family. Framing his goals and progress in terms of his relational orientation gave Tony a more clearly delineated vision of what he was moving toward and a way to track his relational experience.

## **Ethical Issues**

Our most commonly asked questions are whether each of the four heuristic orientations is equally valuable and whether we prefer one orientation over another. Earlier in the article, we included strengths and possible problems with each. We believe the worth of an orientation is best measured by how well it works to promote stable, satisfying relationships that equally support and facilitate the well-being of each member. We also take the ethical position that therapists need to develop the skills and ways of understanding that help to make the hidden, often taken for

granted, social and relational contexts visible. This enables clients to make more informed life choices.

Another set of ethical concerns involves who does the assessment and who sets the clinical goals. We have deliberately resisted presenting the typology as an objective measurement instrument. We use it as a guiding framework to help our clients and ourselves develop a relational perspective that can assist in developing goals and focusing treatment. We take responsibility for introducing the relational perspective into the therapeutic conversation but see assessment as an interactive process between client and therapist. We offer this framework of relational orientations with the idea that therapists of different philosophical persuasions and training will find it useful and adapt it to fit within their ways of working.

### CONCLUSION

Family therapy has models that help us to look at families and couples as units but has not previously had a way to consider the individuals within them in a relational fashion. As family therapists, it is important to have clear frameworks that focus on how people engage relationally. The relational orientation framework presented here increases the conceptual and assessment approaches available to us and expands our ideas regarding how to work relationally.

More important, perhaps, the framework can help family therapists keep relationships central and bridge the gap between individual and systems/relational assessments. When assessment processes include a focus on relational orientations, the goals for therapy will more likely reflect a relational posture. Using this framework for understanding where people come from relationally, therapists can help clients navigate their way into more mutually satisfying relationships and address issues such as depression and addictions from a relational perspective.

The framework raises issues regarding our ethical responsibility when gender and power push relationships away from a more mutual relational balance. The relational-orientations typology serves as a vehicle to raise these relational issues to the foreground so that they be addressed. It makes an important step forward in integrating the relational literatures from women's psychology, family systems, and collectivist cultures. It helps to address the individualistic bias that permeates clinical practice despite a family therapy perspective (Fowers & Richardson, 1996).

The suggested framework raises new directions for research and study. It was developed out of trying to make sense of tapes of clinical work and has been clinically validated because we applied it to our own practice and found it useful. Translating our interactive form of inquiry into an assessment instrument that may be used for quantitative study would take time and testing. It may also serve as a basis for educating clients and others (e.g., Hernandez et al., 2005). We believe that many kinds of problems and symptoms may be related to relationship orientation. We look forward to and encourage further study and dialogue in this direction.

### REFERENCES

- Balswick, J.O., & Balswick, J.K. (1999). *The family: A Christian perspective on the contemporary home* (2nd ed). Grand Rapids MI: Baker Books.
- Bateson, G. (1972). *Steps to an ecology of mind*. Chicago: University of Chicago Press.

- Boyd-Franklin, N., & Franklin, A.J. (1998). African-American couples in therapy. In M. McGoldrick (Ed.), *Revisioning family therapy: Race, culture, and gender in clinical practice* (pp. 268–281). New York: Guilford Press.
- Bronfenbrenner, U. (1979). *The ecology of human development*. Cambridge, MA: Harvard University Press.
- Brown, L., & Gilligan, C. (1992). *Meeting at the crossroads*. Cambridge, MA: Harvard University Press.
- Chodorow, N.J. (1978). *The reproduction of mothering*. Berkeley: University of California Press.
- Falicov, C.J. (1998). The cultural meaning of family triangles. In M. McGoldrick (Ed.), *Revisioning family therapy: Race, culture, and gender in clinical practice* (pp. 37–49). New York: Guilford Press.
- Fishbane, M.D. (2001). Relational narratives of the self. *Family Process*, 40, 273–292.
- Fowers, B., & Richardson, F. (1996). Individualism, family ideology, and family therapy. *Theory and Psychology*, 3, 353–377.
- Gao, G. (1998). An initial analysis of the effects of face and concern for “other” in Chinese interpersonal communication. *International Journal of Intercultural Relations*, 22, 467–482.
- Gergen, K. (1994). *Realities and relationships: Soundings in social construction*. Cambridge, MA: Harvard University Press.
- Goldberger, J.M., Tarule, J., Clinchy, C., & Belenky, M. (1996). *Knowledge, difference, and power: Essays inspired by women’s ways of knowing*. New York: Basic Books.
- Goldner, V. (1989). Generation and gender: Normative and covert hierarchies. In M. McGoldrick, C.M. Anderson, & F. Walsh (Eds.), *Women in families: A framework for family therapy* (pp. 42–60). New York: Norton.
- Hall, G., & Nagayama, C. (2003). The self in context: Implications for psychopathology and psychotherapy. *Journal of Psychotherapy Integration*, 13, 66–82.
- Hernandez, P., Almeida, R., & Dolan-Del Vecchio, K. (2005). Critical consciousness, accountability, and empowerment: Key processes for helping families heal. *Family Process*, 44, 105–119.
- Jordan, J.V., Walker, M., & Hartling, L.M. (2004). *The complexity of connection*. New York: Guilford Press.
- Josselson, R. (1987). *Finding herself: Pathways to identity development in women*. San Francisco: Jossey-Bass.
- Kashima, E., & Hardie, E.A. (2001). The development and validation of the Relational, Individual, and Collective self aspects (RIC) Scale. *Asian Journal of Social Psychology*, 3(1): 19–48.
- Kashima, Y., Kashima, E., & Aldridge, J. (2001). Towards cultural dynamics of self-conceptions. In C. Sedikides & M.B. Brewer (Eds.), *Individual self, relational self, collective self* (pp. 277–298) New York: Psychology Press.
- Kimmel, M. (2004). *The gendered society* (2nd ed). New York: Oxford University Press.
- Knudson-Martin, C., & Laughlin, M. (2005). Gender and sexual orientation in marital and family therapy: A post-gender approach. *Family Relations*, 51, 101–115.
- Knudson-Martin, C., & Mahoney, A. (1998). Language and processes in the construction of equality in new marriages. *Family Relations*, 47, 81–91.
- Knudson-Martin, C., & Mahoney, A. (1999). Beyond different world: A “postgender” approach to relational development. *Family Process*, 38, 325–340.
- Komter, A. (1989). Hidden power in marriage. *Gender and Society*, 3, 187–216.
- Laird, J. (1998). Theorizing culture. In M. McGoldrick (Ed.), *Revisioning family therapy: Race, culture, and gender in clinical practice* (pp. 20–36). New York: Guilford Press.
- Lips, H. (1991). *Women, men, and power*. Mountain View, CA: Mayfield.
- Mahboubi, J.E., & Searcy, A.P. (1998). Racial unity from the perspective of personal family history: When Black and White entered our families. In M. McGoldrick (Ed.), *Revisioning*

*family therapy: Race, culture, and gender in clinical practice* (pp. 229–238). New York: Guilford Press.

McGoldrick, M. (1998). Introduction: Re-visioning family therapy through a cultural lens. In M. McGoldrick (Ed.), *Revisioning family therapy: Race, culture, and gender in clinical practice* (pp. 3–19). New York: Guilford Press.

Parks, C., & Vu, A. (1994). Social dilemma behavior of individuals from highly individualist and collectivist cultures. *Journal of Conflict Resolution*, 38, 708–719.

