

Aspects of power

I will consider three aspects to power in the therapy relationship, which I have clarified following DeVaris (1994). The first is the power inherent in the roles of therapist and client that results from the authority given to the therapist to define the client's problem and the power the therapist has within the organisation and institutions where they work. I will call this role power. Whatever the context of a therapist's work, power is still given by society to those identified as therapists. Various contexts of work can add to the authority given to the therapist (such as the NHS in the UK).

The second aspect of power is the power arising from the respective structural positions in society of the therapist and client, with reference to gender, age, ethnicity etc. I will call this societal power.

The third aspect of power in the therapy relationship is the power resulting from the personal histories of the therapist and client and their experiences of power and powerlessness. I will call this historical power. The personal histories and experiences will affect, and to some extent determine, how individuals are in relationships and how they think, feel and sometimes behave with respect to the power in the relationship. Throughout the book, I will demonstrate how these aspects of power in therapy have been addressed, using various models of power and the three main models of therapy from which most other models are derived.

The three aspects of power that I consider are interrelated, and all apply to the relationship between the therapist and client, rather than residing with either individual. These dynamics can be represented by two triangles: one to represent the client, and the other the therapist. Each point represents the contribution from each individual to each aspect of power. So long as these triangles are separate and unconnected, they function separately, without integration, cooperation or domination (Figure 1b). But the triangles can merge: for example, one triangle could absorb the other, which would represent complete domination (as in Figure 1c). Alternatively, the triangles can integrate, with a large area shared by both triangles and representing mutuality in therapy (Figure 1d). The unshared points of the triangles represent the parts of each individual that remain unique. This book explores how therapy can

aim towards as much mutuality as possible and represent the dynamics of power in Figure 1d.

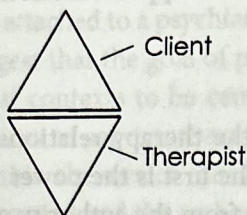


Figure 1b: Separation

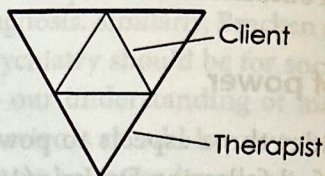


Figure 1c: Domination

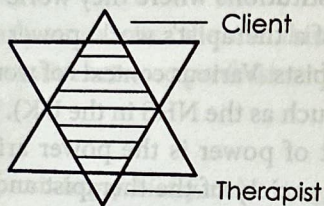


Figure 1d: Mutuality

Another useful way to practically conceptualise the relations of power in the therapy dyad is to consider Cromwell and Olson's (1975) domains of power. They theorise power in families as a construct incorporating three analytically distinct but interrelated domains: power bases, power processes and power outcomes. Power bases are the economic and personal assets (such as income, economic independence, control of surplus money, sex-role attitudes, desire for intimacy, and physical and psychological aggression) that form the basis of one partner's control over the other. Power processes are interactional techniques, such as persuasion, problem-solving or demandingness, that individuals use in their attempts to gain control over aspects of the relationship. Power outcomes are who has the final say – who determines the outcome in problem-solving or decision-making. In the rest of the book, I will apply these ways of conceptualising power to therapy.