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Polyamory: Experiences of Power from Without, from Within, and in Between

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ABSTRACT

This article highlights the ways in which cultural, relational, and therapeutic power can affect polyamorous relationships and the therapeutic process. In therapy, focusing on the power narratives that polyamorous partners might experience can aid in challenging mononormativity while creating space for a variety of relational orientations. Power processes are presented as occurring on three levels: social discourse (without), relational meaning-making (within), and therapeutic practice (in between). A case study is used to evaluate these processes and implications are provided for clinicians working with polyamorous families.

KEYWORDS

Polyamory; power processes; multiple-partner therapy

Introduction

Early critiques by feminist family therapists (Goldner, 1985; Hare-Mustin, 1978) pointed to the ways in which gendered power dynamics play out in families and in the therapy room. Since then, family therapists have addressed issues of power and culture using feminist (Hare-Mustin, 1978), social justice (McDowell & Shelton, 2002), multicultural (Hardy & Laszloffy, 1995), and social constructionist (White & Epston, 1990) lenses. Strides have also been made in the recognition that dominant social and political discourses of gender, class, race, ability, and sexual orientation can affect clients (Hernández, Almeida, & Vecchio, 2005). With the introduction of scholarship on monogamism and mononormativity (Blumer, 2014; Blumer, Haym, Zimmerman, & Prouty, 2014; Blumer & VandenBosch, 2015; Zimmerman, 2012), the discourse of monogamy has become a much needed focus of clinical attention.

Yet, even with these advances, nonmonogamous relationships such as polyamory have been largely ignored (Blumer & VandenBosch, 2015; Jordan & Steele, 2014). Polyamory offers many benefits to its participants; however, it is not without its challenges. Members of polyamorous relationships experience similar challenges to people in monogamous relationships. At times, these common problems can be magnified by the inclusion of multiple partners (Easton & Hardy, 2011). Moreover, in the United States, the overarching, dominant discourse normalizes monogamy

as the ideal and traditional form of intimate relationship (Smith, 1993). The power of the monogamous discourse can subjugate other relational orientations, to create feelings of shame and isolation (Moors, Matsick, Ziegler, Rubin, & Conley, 2013). This power is rooted in mononormativity (Pieper & Bauer, 2005) and monogamism (Blumer et al., 2014). Monogamism can also bias our work as therapists (Twist, Prouty, Haym, & VandenBosch, 2015), and to work effectively with polyamorous clients, we must attend to our own power and privileges (Blumer & VandenBosch, 2015), as well as the possible power dynamics within the relationship (Klesse, 2014a). In this article, we review the current literature pertaining to polyamory, to assist therapists who work with polyamorous systems. Special focus is placed on the dynamics of power that can present in polyamory in the social context (without), romantic relationships (within), and in the therapeutic alliance (between).

Defining Polyamorous Partnerships

The word *polyamory*, derived from the Greek word *poly* (“many”) and the Latin word *amores* (“loves”), can be translated as *many loves* (Klesse, 2011). The term appeared as early as 1953 and was widely adopted in 1990 by communities seeking an alternative to the term *responsible nonmonogamy* (Anapol, 2010). Many polyamorists agree that there is no one way to be polyamorous and that polyamorous relationship structures are diverse (Barker, 2005; Bettinger, 2005; Gilmore & de Arcana, 2015; Heckert, 2010; Keener, 2004; Klesse, 2006, 2011a; Sheff, 2011). Polyamory has been embraced as a personal identity (Klesse, 2014a; Ritchie & Barker, 2006), a sexual orientation (Tweedy, 2011), a relationship structure (Easton & Hardy, 2011), and a relational orientation (Barker, 2005; Blumer et al., 2014). One relational definition describes polyamory as an ethical approach to multiple partners based on the fundamental values of commitment, honesty, freedom, and care (Klesse, 2011). These relationships can be sexual (Tweedy, 2011), emotional (Klesse, 2014a), spiritual (Anderlini-D’Onofrio, 2009), parenting (Pallotta-Chiarolli, 2006), and companionate (Ertman, 2005).

Polyamorists argue that attempts to categorize polyamorous relationship structures constitute a limiting trap that is a symptom of a monogamous culture (Heckert, 2010; Emens, 2004). However, there are prominent relationship structures that are commonly described (see Bettinger, 2005, and Strassberg, 2003, for a review). Some polyamorous relationships are formed hierarchically around a primary dyad, with secondary partners, who may be casual or committed (Finn, Tunariu, & Lee, 2012; Wosik-Correa, 2010). There are more complex arrangements that are commonly expressed through letters and shapes to highlight the level of commitment, involvement, and agreement between the members (Klesse, 2014b). For example, in “Vs” one person has two relationships of equal priority but the partners do not necessarily share a bond with each other (Witherspoon & Wilson, 2013), whereas a triad would consist of three partners who share relationships with each other (Aoki, 2005; Bettinger, 2005). Some polyamorous relationships are closed, which means they express polyfidelity, through exclusivity with each other (Taormino, 2008), while

others are open to including new members emotionally or sexually into the system (Witherspoon & Wilson, 2013).

In this article, *polyamory* is used to describe a relationship philosophy founded on the belief that it is possible, meaningful, and legitimate to have multiple, concurrent, significant relationships (Barker, 2005; Klesse, 2011; Taormino, 2008). Some common permutations of the word are also used, including *poly*, which often functions as an adjective (e.g., *polyclient*; Ritchie & Barker, 2006). Also, in this article, as in our practice, we use the term “family therapy” to describe our work and to label ourselves. This labeling indicates our move from dyadic assumptions and our practice of systemic therapy, inclusive of families of origin and families of choice, which can include multiple partners and friendships.

Power Without, Within, and in Between

In the following sections we explore the ways in which different discourses of power can influence the challenges that polyamorous relationships might face (a) from the social context (without), (b) in the polyamorous relationship (within), and (c) in the therapeutic relationship (in between). The power *without* refers to both our dominant culture’s endorsement of monogamy, as well as gendered, heteronormative, and racialized privileges. The power *within* the relationship can be subtle or overt and evidenced in the challenges partners might face in relationship maintenance. The power *in between* refers to the dynamics between therapist and clients, which might be based on the therapist’s own monogamism (Twist et al., 2015), creating a potentially stigmatizing therapeutic environment. We separate these processes into three levels for simplicity of presentation, but they are in fact reciprocal, intersecting, and affect each other on multiple levels.

Power from Without: Discourses of Mononormative Stigma and Privilege

Polyamorous partners and polyfamilies can experience stigma for being in what is considered “nontraditional” and “nonnormative” relationships (Moors et al., 2013). In the United States, monogamy is typified as a heteronormative agreement between two people expressing emotional, legal, and sexual exclusivity and commitment (Frank & DeLamater, 2010). It has been institutionalized as the optimal relationship through policy, religion, and social mores (Coontz, 2004; D’Emilio & Freedman, 1988; Smith, 1993). This attitude traditionalizes dyadic coupling as desirable, natural, historical, and the most beneficial to the family and the community (Sheff, 2011; Smith, 1993). Detractors of monogamy claim that it is a social organizer (Cott, 2002) that enforces inequalities of gender and sexual orientation (Jackson & Scott, 2004; Mint, 2010; Risman, 1998). Regardless of monogamy’s critics, monogamy remains largely unchallenged, which creates the bias of monogamism and mononormativity (Blumer et al., 2014; Conley, Moors, Matsick, & Ziegler, 2012; D’Emilio & Freedman, 1988).

Mononormative Stigma

Monogamism describes an ingrained preferential attitude toward monogamy that stems from the assumption that all people desire and conform to monogamous relationships (Blumer et al., 2014). Such monogamism in our culture derives from *mononormativity*, which is a hierarchal construct that positions nonmonogamy as alternative and different (Frank & DeLamater, 2010; Pieper & Bauer, 2005). Through this process of othering, polyamorists and other consensual nonmonogamists can be misunderstood, marginalized, and disregarded, while monogamous people enjoy unearned privileges due to their relational orientation (Blumer et al., 2014). This can stigmatize nonmonogamous relationships as indecent, deviant, corrupt, or lascivious (Moors et al., 2013). Polyamorous partners often do not reveal their relationships to their families, friends, and communities in an effort to protect themselves from such stigma (Barker & Langdridge, 2010; Sheff, 2011; Young, 2014).

Polyamorous partners who reveal their relationship status to friends, family, and in the workplace might encounter feelings of exclusion (Sheff, 2011). If family members and friends do not accept their partnerships, the partners can feel rejected (Moors et al., 2013). Sometimes partners decide to cut themselves off completely from the rejecting families and friendships, which further isolates partners and their children (Sheff, 2013b). Similar feelings of stigma have been reported by polyparents with children in school, as both parents and children face potential bias from classmates, other parents, and school faculty (Otter, 2014; Pallotta-Chiarolli, 2006). Workplaces are also a potential area for discrimination, as they typically offer no recognition of multiple-partner relationships (Klesse, 2014b). In both work and school settings, complications can arise when attending social events intended for family members, or taking time off for family events (Green, Payne, & Green, 2011; Veaux & Rickert, 2014).

In polyamory, as in other multiple-partnered relationships such as polygamy, there is a lack of legal acknowledgment and protection in the United States (Aviram & Leachman, 2014; Davis, 2010; Dryden, 2015; Strassberg, 2003). Non-legally recognized partners can be barred from obtaining government tax deductions and barred from work-provided medical insurance (Aviram & Leachman, 2014; Emens, 2004; Robinson, 2013), and there is no legal recourse for separations (Sheff, 2013a). The lack of an official divorce process can place partners in opposition to each other as they seek legal and financial remedies afforded to persons from monogamous marriages, such as child support and alimony (Aviram & Leachman, 2014; Dryden, 2015; Emens, 2004; Sheff, 2013a). Issues of custody are also frequently mentioned as areas of concern and fear for divorcing partners (Barnett, 2014; Black, 2006).

Partners have reported that the strain of encountering discrimination has had deleterious effects on their relationships (Sheff, 2011). This has led some polyamorists to live double lives, keeping their private lives secret and not publicly disclosing their relationships (Pallotta-Chiarolli, 2010). This secrecy can cause tension in partnerships, and the most frequent challenges reported by polyfamilies stem from the stigma accompanying mononormativity (Moors et al., 2013; Pallotta-Chiarolli, 2010; Sheff, 2011, 2013b).

Discourse of Privilege: Who Benefits?

At the institutional root, monogamy stems from a heteronormative and patriarchal culture that promotes the ownership of a woman by a man through marriage (Weadock, 2004). While such explicit dominance is no longer the norm, women continue to be socialized to value caretaking and romantic ties (Robinson, 1997; Rosa, 1994). This in turn privileges the needs of the family over their personal pursuits and financial independence (Ziegler, Matsick, Moors, Rubin, & Conley, 2014). For these reasons, heterosexual monogamy has been argued to largely benefit men over women (Rosa, 1994).

Conversely, polyamory has been positioned as a radically feminist and political way of relating that combats the historical monogamous narrative (Ritchie & Barker, 2007; Robinson, 1997). Polyamorous women have reported that through polyamory they shifted to an agentic view of the self and came to feel liberated from traditional gender, maternal, work, and relationship roles (Sheff, 2005). Yet, these gains cannot be assumed. Although many polyamorous relationships report to aim for egalitarianism, they are prey to falling into gendered divisions of labor (Klesse, 2014b) that mirrors monogamous culture.

There is a popular belief that multiple-partnered relationships benefit heterosexual men over women (Dryden, 2015; Otter, 2014). This view is driven by the heterosexist perception that men will secure multiple sexual partners and subjugate women to their own needs (Robinson, 1997). It takes for granted the idea that women prefer, are satisfied with, and feel more secure with monogamous sex (Jeffreys, 1990). This runs contrary to women's own reports of lowered and diminishing sexual desire in monogamous long-term relationships (Brewis & Meyer, 2005; Sheff, 2005; Ziegler et al., 2014). Polyamory has also been suggested as one possible way to offer renewed sexual stimulation by reenergizing existing relationships through the new relationship energy, spilling over from introduction of new partners (Wosick-Correa, 2010). At the same time, new relationship energy has been noted to have the opposite effect, wherein the partner in the new relationship is pulled away from existing relationships in the excitement of the new (Barker, 2013).

In polyamory, as in all relationships, the interactions of axes of identity contain cultural meanings that influence the well-being of the individuals and the relationship as a whole (Collins, 1998). Yet, the polyamory literature is also prey to privileging discourses as it largely portrays polyamory as a phenomenon existing among a homogeneous group of white-European, educated, middle-class individuals (Haritaworn, Lin, & Klesse, 2006; Klesse, 2014b; Noel, 2006; Rambukkana, 2015; Sheff & Hammers, 2011). This overrepresentation has been termed the "privilege of the perversities" (Sheff & Hammers, 2011, p. 198) and highlights a hegemonic discourse that polyamory is for the privileged, "which in turn can make polyamory a fraught, inaccessible, or oppressive space for many" (Rambukkana, 2015, p. 23).

People who are members of racialized groups; lesbian, gay, bisexual, and trans people (LGBTQ); and the working class are often subject to oversexualization, while people with disabilities are asexualized (Hutchinson, 1999; Klesse, 2012). The stereotypes of promiscuity and loose ethical value systems can be amplified when

involved in a relationship orientation that is stereotyped as overtly promiscuous (Haritaworn, Lin, & Klesse, 2006, 2012, 2014b; Noel, 2006; Sheff & Hammers, 2011). Thus, polyamory can become a de facto exclusive relational orientation, potentially contributing to forms of oppression, and continuing the invisibility of intersections of identities, and inequalities (Rambukkana, 2015).

Power from Within: Polyamorous Partnerships

The creation and maintenance of polyamorous relationships can be complicated by the impact of the dynamics of relational power within the partnerships (Goldner, 1985; Hare-Mustin, 1978; Klesse, 2014b, 2006; Rampage, 2002). Subtle power differences can exist between partners, and one area that is sensitive to such power is in the structure of the polyamorous relationship (Sheff, 2013b). For example, the primary-secondary formation, where a primary dyad is accompanied by secondary others (Strassberg, 2003), can become hierarchical in that the couple prescribes the rules for their extradyadic relationships (Bettinger, 2005; Veaux & Rickert, 2014). Secondary relationships can be casual or committed and are often construed as subordinate to the primaries (Veaux & Rickert, 2014). In other types of shared-commitment relationships, such as polyfidelity, closed triads (three partners), and quads (four partners), the decision making of partners can create differential power dynamics (Aoki, 2005; Strassberg, 2003). Here, decision-making processes are differentially delegated across partners (e.g., formal consensus, majority rule) and dependent on the relationship (Gilmore & de Arcana, 2015).

Such decision-making processes that occur in polyamorous relationships are decisions to integrate new partners, decisions for safer sex, difficulties relating to other partners, achievement of parity, and allocation of veto power (Wosick-Correa, 2010). Who gets to attend to these decisions and how they are addressed can promote power imbalances if the power to make decisions does not seem to be equitably shared (Veaux & Rickert, 2014). To address these concerns, some polyamorous families establish ground rules, boundaries, and relationship contracts (Anapol, 2010; Easton & Hardy, 2011; Taormino, 2008). Still other polyamorous partners forgo contracts and explicitly limit their rules to the requirement for open and honest communication (Gilmore & de Arcana, 2015).

As in many relationships, power imbalances can lead to discomfoting feelings, which can in turn create power struggles (Deri, 2015; Heaney, 2011). For example, jealousy within polyamorous relationships has been associated with issues of power (Mint, 2010). Jealousy is described as a “feeling rule” (Deri, 2015, p. 5), dictated by cultural norms that tell us how to feel in any given situation. Jealousy can be generated by feelings of ownership and betrayal (Deri, 2015; Pines, 2013) and can be used to control and dictate relationships, especially by those who feel they have less power (Keener, 2004; Mint, 2010). Although partners in polyamorous relationships have agreed to multiple-partnered relationships, the introduction of new partners can be complicated and feelings of jealousy can surface (Deri, 2015; Mint, 2010). It is hypothesized that in polyamory because other relationships are in the open,

jealousy can be attended openly, which can create opportunities for greater self- and other-awareness (Veaux & Rickert, 2014). It is possible that through this process a new emotion, compersion (a feeling of joy when a loved one experiences the love of another) can arise (Deri, 2015; Veaux & Rickert, 2014).

The introduction of new partners into an established polyamorous relationship can shift power dynamics (Wosick-Correa, 2010), and power issues might arise when a partner introduces the idea of opening a previously monogamous relationship (Zimmerman, 2012). One partner might feel pressured to conform to the desires of the monogamous partner (Klesse, 2014b), while the other partner may explore a polyamorous relationship simply to please his or her partner (Zimmerman, 2012).

In polyamorous relationships, financial and emotional resources can be distributed among multiple partners. Multiple partners are also available to assist in domestic duties, from household labor to child-rearing (Emens, 2004; Sheff, 2010). While polyliterature often discusses these benefits (Anapol, 2010), it is important to note that issues of structural power can arise (Klesse, 2014b). Compared with white heterosexual men, women, people of color, people with disabilities, and LGBTQ people experience more workplace discrimination and have fewer job opportunities and earning potential (Wilson, 2006). These systemic inequalities can influence household decisions such as who will work in and outside of the home, creating financial insecurities and dependence (Haritaworn, Lin, & Klesse, 2006; Klesse; Noel, 2006).

Power in Between: Polyamory and the Family Therapist

While there are many benefits to polyamorous relationships, the first two sections highlighted some of the challenges. It is with these challenges that family therapists can assist polyfamilies as they work to create and maintain successful relationships. Yet even as we are becoming more aware, informed, and inclusive of issues of power and justice in families (Hare-Mustin, 1978; Hernandez et al., 2005), we continue to we retain a largely collusive stance with the narrative of monogamy and extend the monogamous discourse (Blumer et al., 2014; Blumer & VandenBosch, 2015; Jordan & Steele, 2014; Marquez, 2012).

The field of marriage and family therapy has embraced the idea of marriage as a focal point for clinical practice, as evidenced in our licenses, organizing bodies, and academic programs. Some practitioners have replaced the word *marriage* with *couple* to be more inclusive of other relationship forms (Marquez, 2012). However, the word *couple* still comes from a monogamous culture and intimates that two is the unit of romantic relationships and relationship therapy. Further, many therapists are trained to take the view that extradyadic engagement is necessarily harmful (Hertlein, Wetchler, & Piercy, 2005). Few family therapists challenge the monogamy narrative, and little evidence exists of published family therapy research on consensual nonmonogamy (Blumer et al., 2014; Blumer & VandenBosch, 2015; Jordan & Steele, 2014; Rubin, 2001).

Due to the lack of research and training on polyamory, family therapists risk retaining ignorant and potentially harmful attitudes toward polyfamilies (Jordan & Steele, 2014). This harmful stance was illuminated in two early studies of therapists' beliefs about nonmonogamous relationships. In those studies, it was found that therapists correlated open relationships to personality disorders, believed nonmonogamous people feared commitment, felt that polyamory was more harmful than infidelity, and felt that therapy with polyamorous clients should focus on changing their relationships (Hymer & Rubin, 1982; Knapp, 1975).

While outdated, these studies shed light on the possible relational danger that can occur when therapists remain unaware of nonmonogamies. Since those studies, therapist attitudes might have changed, as the field of family therapy is becoming more inclusive of once avoided or maligned family forms (Alessi, Dillon, & Kim, 2015; McGeorge & Stone, 2016). Still, recent studies of therapists found subtle, pessimistic perceptions of nonmonogamy as threatening and problematizing (Finn et al., 2012), including beliefs that polyamory is an excuse to cheat on partners and that such relationships are unsustainable (Witherspoon & Wilson, 2013).

In polyamorous communities, it is frequently mentioned that there are few resources for finding adequate clinical services (Weitzman, Davidson, & Phillips, 2009). Polyfamilies report a distrust of therapists due to a tendency to support monogamous norms, which creates a stigmatized, and ineffective therapeutic process (Baumgartner, 2009; Weber, 2002). A 2014 sample revealed that 16.6% of 864 polyamorous participants felt stigmatized by practitioners (Witherspoon, 2015). In an earlier sample, 38% of participants did not reveal their polyrelationships to therapists, while of those who did, 27% reported negative experiences (Weber, 2002). These negative experiences were attributed to therapist bias, which created feelings of problematizing and pathologizing of polyamory and a disregard of the actual issue presented for treatment (Baumgartner, 2009).

Power Narratives With Polyamorous Clients: The Case of Anna and Liam

Through the case of Anna and Liam, we will present the ways in which power discourses can be engaged with in effective polyamorous family therapy. Following the case introduction, we evaluate the process on three levels of power: social discourse (without), relational meaning-making (within), and therapeutic practice (in between). The relationship described below is a composite of cases from the first author's clinical practice.

Anna and Liam have been married for 15 years. When they met, Anna told Liam that she did not want a monogamous relationship and was open to several different styles of nonmonogamy, such as open relationships, swinging, and polyamory. Anna, who identifies as white and bisexual, and Liam, who identifies as Samoan and straight, decided to try polyamory and have been engaged in various permutations of polyamory since.

When Anna and Liam came to therapy, they were in a primary–secondary relationship. They placed their marriage at the center but highly valued their secondary

relationships. They lived with their son (aged 7), Anna's bisexual and white identified boyfriend Topher, and Lil, Anna's asexual and white identified girlfriend. Both Liam and Lil work outside the home. While Liam was the main financial contributor to the primary relationship, Lil assisted by paying rent and other daily expenditures. Topher works primarily in the home and assists Anna with housework and childcare. This arrangement has benefited the family, and especially Anna, as she has a chronic illness and her severity of symptoms fluctuates, making day-to-day work difficult.

Liam is currently involved with Jess, who is bisexual and black identified. Jess spends a few nights during the week with the family but does not contribute to the finances or domestic duties of the family. When Liam and Jess were first dating, Anna enjoyed Jess's company and thought she was a good fit for her husband. Over time, however, Anna began to develop feelings of jealousy toward Liam and Jess's relationship. Anna had begun to feel disengaged from her relationship with Liam, and the couple decided to come to the first author's clinic. The therapeutic aim was to assist Anna and Liam in dealing with the jealousy that had arisen. To center the therapy on the needs of the client, the therapist followed the three categories of power, as outlined earlier.

Power in Between

Anna and Liam attended the first session of therapy alone and presented as a couple. During the intake process, the therapist asked questions to elicit broader responses on relationship orientations. As the couple appeared to become more comfortable, they revealed their multiple-partnered status. The therapist then discussed her experience with nonmonogamous clients and her support of multiple-partnered relationships. She also pointed out her awareness of the power differential between her clients and herself, as a person in a monogamous relationship and who benefits from monogamous privilege (Blumer et al., 2014).

Part of addressing monogamous privilege was the therapists' monitoring her verbal and nonverbal language to watch for possible microaggressions (Witherspoon, 2014). The therapist shared that she attempts to be mindful of monogamous language, but it could make appearances in session (for example, saying "couple" instead of "partners"). Another point the therapist made was that, even though she had experience with polyamorous and nonmonogamous clients, she did not want to assume all polyclients are alike. Conversely, the therapist did not want the clients to feel they had to spend sessions educating the therapist. Instead, there was an open invitation to correct the therapist, and the clients invited the therapist to ask for clarification when needed.

Time was spent in deciding who to include in future sessions. Initially, Anna wanted to invite Topher and Lil, feeling they were committed to the family as a unit. However, Liam felt that excluding Jess would minimize her importance to the family. Anna and Liam decided to include all their partners in order to create an atmosphere of support and problem-solving.

Power Without

Attention was given to mononormativity and how it appeared in issues such as jealousy. The partners lived in a small community in the south, and it was difficult for them to live openly. At times, they felt they had to hide their identities from the community, making it difficult to experience dating “out in the open” and created feelings of “sneaking around” counter to the basic tenets of their relationship. As they discussed the mononormative bias in their town, the partners grew more comfortable talking about the ways in which they had combated such problems in the past. This discourse gave the therapist the opportunity to learn about the unique strengths of this family and uncover pathways to further connection and understanding.

Attention was also given to the idea of jealousy as a social construct determined by ideas of monogamy. In U.S. culture, sexual, financial, and emotional exclusivity is normed through the culture and politics of monogamy and threats to that exclusivity is controlled through jealousy (Deri, 2015). As emotional and sexual commitments are allowed in polyamory, it is possible to confront jealousy through self- and other-awareness and flexible and open communication (see Mint, 2010; Vieux & Rickert, 2014, for a detailed description of strategies). To aid in this dialogue, the therapist engaged the partners on questions of what relationships meant in their families of origin, how each partner decided on polyamory, and the difficulties and successes each had in maintaining their relationships. Questions were also asked about to understand how their families-of-origin viewed extradyadic relationships and how jealousy was expressed and managed. The therapist proceeded in questioning if there was ever a time when jealousy was a source of positive change for the family, which shifted the conversation to one of agency. Liam expressed that he felt jealousy earlier in their relationship, when Anna first began dating others. During the couple’s previous challenges with jealousy, they worked through the feelings by negotiating a relationship contract. This contract became a focus for the other partners when they began to discuss the power within their relationship.

Power Within

As the therapy progressed, it became important to attend to the different power dynamics within the group. The secondary partners felt that Anna and Liam had most of the power and that they had to play by Anna and Liam’s rules for relating. Lil and Topher, who both lived in the house, felt that the relationship met their expectations and they continued to partner outside the home. Jess, however, felt that she had very little power in the relationship and often felt jealous that she could be excluded and ultimately “tossed aside.” The three felt that overall Anna and Liam worked to balance the needs of the partners, but at times they did have difficulties, knowing that their concerns might be superseded by those of the primaries. Time was spent openly discussing these issues and various ways in which open and generative dialogues could be managed at home.

Jess revealed feelings of being left out and admitted that she might be contributing to Anna's jealousy because of her own jealous feelings. Anna empathized with Jess and shared that she, too, felt left out and that she was experiencing her own jealousy as a threat to the foundation of her relationship with Liam. This threat stemmed from Anna's perception that Liam and Jess were lying rather than being open and honest. Anna, Liam, and their partners had built a relationship on honesty, but Anna felt as if there was a double standard at play. She felt that Liam was not always honest with her and that she felt Jess used "little white lies," which eroded the foundation of Anna and Liam's commitment. This exploration led to a more complex, detailed understanding that transformed Anna's jealousy into a relational challenge and an awareness of Liam's violation of the previously agreed to contract. The partners brought in the contract, and talked about the ways it privileged the couple over the other partners and how that might create power struggles. The group decided to renegotiate some of the wording in the contract which gave a feeling of equity to the partners.

The case of Anna and Liam progressed over time, shifting among different perspectives. When therapy began, the focus was on Anna's jealousy. It became clear that Anna was more worried about the negative effects of dishonesty. The therapy system included the experience and wisdom of all the partners so that everyone in the system would have a voice in the process. They worked together to understand each other's perspectives and ultimately to reach a successful resolution.

Clinical Considerations

Next, we offer therapists' points to consider to increase critical consciousness of biases and mononormative assumptions. Critical consciousness is an awareness-raising process, founded on the ideas of Freire (2000), of coming to recognize the ways in which the personal is nested in social and political contexts. It requires the therapist to attend both to the relationship between problems that present in therapy as well as structural inequalities and to the therapist's own power and membership in a dominant group (Hernandez et al., 2005). The following section may assist therapists in broadening their understanding of and their sensitivity to clients who do not fit into traditionalized relationship structures.

Recognize Mononormativity in Training and Research

Family therapists must recognize the effect that mononormativity has on our field. The limited research and training available for clinical work with polyamorous clients (Jordan & Steele, 2014; McCoy, Stinson, Ross, & Hjelmstad, 2013; Zimmerman, 2012) has made clients frustrated when they spend more time educating their therapists than engaging in therapeutic conversation (Weitzman et al., 2009).

Even though research is limited, quite a few books are available to help therapists gain a better understanding of polyamory (e.g., Anapol, 2010; Easton & Hardy, 2011; Veaux & Rickert, 2014). In addition, recommendations of the best practices to use

with polyamorous clients have been published in other fields of therapy (Baumgartner, 2009; Davidson, 2002; Weitzman et al., 2009). Such best practices are focused on the assumption that partners who seek therapy do so for a variety of reasons. Just as therapists should not presume polyamorous clients want to change their lifestyle, they should also create a space where clients can comfortably seek help negotiating issues related to that lifestyle. Common concerns that polyamorous partners might face can include: negotiating relationship parameters, agreements, and boundaries; coming-out as polyamorous to children, family, and friends; locating support communities and resources; and challenges around separation (Weitzman et al., 2009). Therapists can also learn more by joining online community forums (such as those at www.lovingmore.org or www.polyamory.com) and attending local group meetings.

Recognize Biased Assumptions

It is important to acknowledge that our culture designates monogamy as the most desirable relationship structure, leaving therapists open to bias (Emens, 2004; Zimmerman, 2012). It is vital for therapists to be reflective and to monitor themselves for occasions when clients might be provoking prejudices and negative assumptions (McGeorge & Carlson, 2011). The problems that arise in this area can be related to the therapist's own sexuality, religious beliefs, and personal relationship history (Harris & Hays, 2008). One factor of sexuality that can pose challenges for therapists is the therapist's possible discomfort about gay, lesbian, straight, bisexual, and asexual multiple-partner configurations or a tendency to liken polyamory to infidelity. Biased assumptions can lead the therapist into committing microaggressions against clients (Witherspoon, 2014, 2015). Clinicians should become vigilant in monitoring possible microaggressions, such as nonverbal cues (e.g., sighs, avoiding eye contact when clients discuss multiple partners) or verbal cues (e.g., redirecting the topic, or minimizing the relationship; Kolmes & Witherspoon, 2012).

Biased assumptions can also be driven by commonly held misconceptions of polyamory. One such misunderstanding is the belief that polyamory is limited to sexual encounters (Ritchie, 2010). This idea stems from the conflation of polyamory with other types of nonmonogamous relationships, such as open and swinging affiliations (Matsick, Conley, Ziegler, Moors, & Rubin, 2013). Klesse (2006; 2011) argued that although polyamorous individuals can welcome sexual involvements with multiple partners, intimacy among polyamorous partners remains guided by feelings of love and commitment (Barker & Langdridge, 2010).

Another widely held misconception about polyamorous families is that children who are raised in polyamorous households will be harmed (Goldfeder & Sheff, 2013). This is contrary to research that reports polyamorous parents can benefit children (Sheff, 2013b). The challenge for therapists is to determine whether and how their values regarding parenting might be affecting their judgments and how those values might be harmful to polyfamilies. This understanding can be gained by reading relevant resources (see Sheff, 2013b, for a review). Therapists new to

working with polyamorous clients can benefit from processing any potential assumptions with a colleague experienced with nonmonogamous relationships.

Recognize Monogamous Privilege

Mononormativity lets people enjoy certain unearned rights through monogamous privilege (Blumer et al., 2014) solely on the basis of their relational orientation. Mononormative power can define and construct the identities of the partners in polyamorous relationships (Barker, 2005). Straight monogamous individuals are not typically concerned with whether or not they are violating norms. They are free to express their relationships at work, with friends and family, and in other social locations. Ignoring the potential effect of privilege can create an obstacle to an effective therapeutic relationship. Through the acknowledgement that there is monogamous privilege in U.S. culture, it is then possible to discuss ways in which polyfamilies and partners might have felt the effects of such discrimination in their own families, friend groups, workplaces, and schools (Sheff, 2013b). A first step for therapists is to review literature on deconstructing privilege (e.g., McGeorge & Carlson, 2011).

Recognize Polyamorous Validity

Therapists do not need to be experts on polyamory or polyamorous themselves to effectively work with polyamorous clients. They simply need to be willing to learn about and be open to different relational orientations (Blumer & VandenBosch, 2015). Clinicians should also be aware that “polyamory” is a broad term that encompasses many types of relational styles (Klesse, 2006). There is no one way to be polyamorous, and so it is important to avoid rigid conceptualizations of polyamory (Barker, 2005). The therapist who accepts polyamory as a viable and flexible relationship system, albeit one that does not have power in our culture, can create a respectful and open space for polyclients (Baumgartner, 2009). Part of this respectful stance is the recognition of the power of language.

Certain kinds of language can be generative and others can be silencing. When we meet clients for the first time, it is important to use language that makes space for the possibility of more than one partner (Moors & Schechinger, 2014; Weitzman et al., 2009). By phrasing questions openly, and without hetero- or mononormative assumptions in forms like “How many people currently participate in your relationship?” therapists can empower clients to disclose relationship orientations (Witherspoon, 2015). This respectful stance can begin before meeting, and intake paperwork can assess about a variety of relationship structures and preferences (Moors & Schechinger). Attention to such language in assessment and in sessions helps to legitimize polyamory and other multiple-partnered relationships and gives the clients’ the ability to assess if the therapist is affirming (Baumgartner, 2009; Blumer & VandenBosch, 2015; Moors & Schechinger; Weitzman et al; Witherspoon).

Conclusion

As polyamory and other forms of consensual non-monogamy remain largely obscured in family therapy, we are still charting the ways in which mononormativity shapes our beliefs about legitimate relationships. To fully understand polyamory, we can engage in a process of untangling our own meanings of monogamy and how they might influence our practice. Hudak and Giammattei (2014) suggested that we incorporate the idea of “doing gender” (Butler, 1988) so that we can begin “doing family.” With this framework, essentialist beliefs about the family are transformed from a structural definition to one based on intention, responsibility, and choice. This inclusive framework helps family therapists better equip themselves with the tools needed to work systemically with all types of couple and family systems.

Polyamorous clients seek therapy for a multitude of reasons. Some of these are related to day-to-day life, others to the challenges specific to multiple-partnered relationships. This article highlighted some commonly cited challenges faced by polyamorous partners, with special focus on the ways in which cultural, relational, and therapeutic power can affect polyamorous relationships and the therapeutic process involving them. In therapy, this focus can aid in creating of a greater sense of agency while creating the space for new relational definitions, both interpersonal and cultural.

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